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ABSTRACT

This monograph was written to inform organizations working with homeless families about some potential sources of funding for their programs and to briefly describe the benefits available to homeless families. The focus throughout is exclusively on services and not on housing. Readers are guided to the major resources available through both the Federal Government and the private sector. Successful fundraising strategies used by homeless providers are discussed and a few creative ideas for special fundraising events are included. Individual sections focus on how to develop a fundraising program; federal funding specifically for the homeless (e.g., The Stewart B. McKinney Act); useful federal programs not targeted for the homeless; private sources of program funds, including foundations, corporations and businesses, religious institutions, and individual donors; and federal programs that provide benefits and services to homeless families (Aid to Families with Dependent Children; Supplementary Security Income; Social Security; Veterans Benefits; Food Stamps; Women, Infants, and Children Program; Medicare; the Job Training Partnership Act; Medicaid; and Headstart). A 2-page annotated bibliography is included; a 28-page annotated address list is appended. (NB)

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CREATIVE SOURCES OF FUNDING FOR PROGRAMS FOR HOMELESS FAMILIES

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Introduction

Homeless people desperately need low-income housing, but they also need services to help them handle the myriad other problems they face. Against formidable odds, homeless women, men, and children are taking advantage of literacy, job placement, counseling, and skill-building programs offered in shelters and other centers providing services to homeless people.

Homeless people are entitled to benefits from many government-funded programs, but miss out on this help because they are uninformed. Even for those families who are informed, access is often difficult. Fully one-third of all poor children eligible for Medicaid do not receive it. Although in dire need of services such as Head Start and Early and Periodic Screening, Diagnosis, and Treatment (EPSDT), homeless children are often not enrolled in these programs.

The purpose of this monograph is to inform organizations working with homeless families about some potential sources of funding for their programs and to briefly describe the benefits available to homeless families. The focus throughout is exclusively on services and not on housing.

Armed with this information, service providers will, in turn, be able to inform homeless families, and when necessary, advocate for full participation in critically needed programs. This information can be used for both existing and new programs in search of sources of funding and available services.

While not exhaustive, this monograph will guide the reader to the major resources available through the federal government and the private sector. It also discusses successful fundraising strategies used by homeless providers and includes a few creative ideas for special fundraising events. We hope this monograph is helpful to those people who are in the field working tirelessly to provide services to the millions of men, women, and children in America who are homeless.

Developing Your Fundraising Program

In developing a fundraising plan for your program, it is wise to investigate all potential funding sources, both public and private. Although it is time consuming and often complicated, a diversified funding base may be preferable. The following basic funding sources should be considered:

- Government (federal, state, county, and city)
- Foundations
- Corporations and businesses
- Religious organizations
- Individual donors
- Special fundraising events

Each of these sources is discussed in this document except for state and local government programs, which are too numerous to cover adequately. Readers may contact their own department of social services, or their state or city coalition for the homeless, if one exists, for information on locally funded programs in their area.

When possible, specific examples are given of what other private nonprofit and public sector programs experienced in their search for funding. Some national organizations that provide information on potential funding sources for nonprofit organizations that serve homeless families are listed in the appendix.

Accessing Federal Government Funds

Local nonprofit organizations can acquire federal government funds in several different ways. Programs such as the Transitional Housing Demonstration Program administered by the Department of Housing and Urban Development (HUD) and the Primary Health Care Program administered by the Department of Health and Human Services (DHHS) provide funds directly to nonprofit organizations. Proposals are solicited from prospective grantees, and funding is awarded on a competitive basis. The requests for proposals (RFPs) put out by HUD, DHHS, and other federal agencies spell out the specific criteria on which the grant applications will be judged. Potential grantees must address the criteria defined by the federal agency that administers the program, but discretion is allowed in adapting services to meet local needs and resources.

Another common distribution route for federal funds is through block grants to the states or to the states *and* other designated localities. Federal programs such as the Mental Health Services Block Grant and the Social Services Block Grant give funds to each of the states and territories, which then pass the funds to local governmental bodies, usually county governments. Federal programs such as the Community Development Block Grant and the Emergency Shelter Grants Program of HUD distribute funds to the states and to entitlement cities and counties, that is, cities with a population of 50,000 or more and urban counties with a population of 200,000 or more. The states may distribute their funds directly to nonprofit agencies or to local governments; the entitlement cities and counties may distribute monies directly to nonprofit organizations.

The amount of funds allocated to a state or designated locality is determined by a formula based on its urban population, the availability of funds, the amount of poverty, and the scope of the problem the grant is addressing. The amount of the grant varies from program to program.

The federal government develops broad guidelines for their block grant programs, and each state or designated locality has to develop a plan within those guidelines describing how the funds will be used. The states usually have broad discretion in how they use this money. In many cases, organizations seeking funds must submit proposals and compete for funds with other nonprofit organizations. Sometimes programs at the state and local level simply allocate available funds to credible organizations working in the area specified by the federal funding program. Thus, for many reasons, it helps to know what is happening in your state and locale and to be known by decisionmakers involved in the funding process.

Understanding your state's or locale's planning process will help you learn when and where to direct your advocacy efforts to have an impact on the formulation of state and local plans. Block grant programs not specifically designed to serve the homeless but nonetheless applicable to your program may be difficult to learn about. Therefore, persistent advocacy may be required to obtain any amount of block grant funding for programs that serve homeless families.

Should You Apply for a Federal Grant?

Applying for a federal grant is difficult and time consuming. However, it can provide substantial funds for your organization. Since the process is complicated, some things should be considered before you undertake a grant application. Only you and your organization can determine if you have the time and the resources to write a proposal. For example, you are usually required to document a clear need for the services you intend to provide to homeless families. This usually takes some research to determine the number of homeless people in your locality, how many would use your proposed service, and whether any programs similar to yours are serving this population. You do not want to duplicate existing programs unless these programs are overflowing and cannot meet the demand for services, which is often the case.

If new or additional services are needed, consider how they can be provided in the most efficient way. *Coordination of services is very important.* Find out about other organizations, public and private, running similar projects or working with the same population. Determine how your organization's proposed efforts could be coordinated and integrated into existing services. Does another organization have a particular skill in providing a needed service? If so, you may want to consider applying jointly for a grant with another agency, if this is allowed, or applying for your organization alone but asking other agencies for commitments of their services and so forth for the homeless families you serve.

You should ask yourself two other important questions:

- Will accepting this grant hamper any advocacy work?

Some groups will not accept government funds because they believe it will compromise their advocacy position.

- How will federal requirements such as collecting statistics, submitting periodic reports, or adhering to policy guidelines affect your staff and the homeless persons you serve?

Often, people who are highly skilled at providing direct services are not interested in or skilled at compiling statistical data. One federal grantee working with homeless youth could not get the evaluation component of the program off the ground. The organization solved that problem by bringing in a university professor to design the evaluation component and using university students to help implement it.

Accepting a federal grant may strictly define the category of people your program can serve. The staff would have to turn away people who do not fit into the category. Would you be willing to change your program?

Preparing Your Grant Application

Federal Funds

1. Once you decide to apply for a federal grant, you need to find out which agencies are making grants for your kind of services. The *Federal Register* is a daily publication that announces new sources of funding through the federal government. Federal agencies publish a "Notice of the Availability of Funds" in the *Federal Register* describing their program guidelines, where to mail a request for an application, dead-

lines for proposals, sources of additional information, and criteria on which proposals will be evaluated.

The *Federal Register* is available in major libraries, many colleges and universities, and some larger social service agencies. Subscriptions cost $340 per year or $170 for 6 months (see bibliography). It is expensive for a nonprofit organization to subscribe, and it is tedious and time consuming to monitor it on a regular basis. Some organizations rely on newsletters from the National Coalition for the Homeless, the Homeless Information Exchange, or similar local organizations to alert them to new funding announcements. Subscriptions to these newsletters are inexpensive or may be free of charge.

2. Send for the grant announcement and read it carefully. Highlight anything you do not understand. If this is your first federal grant, several sections will probably be highlighted. Do not let this discourage you.
3. Note all the deadlines for the submission of required information and the actual proposal. These deadlines must be met, because late proposals are not considered.
4. Be sure that your idea or proposed project fits the requirements for the type of project this federal grant will fund. If you are unsure of the requirements, contact the local or regional office that administers the grant program.
5. Do some further research. Contact the local or national office of the agency administering the grant program and see if you can get any assistance in understanding the grant announcement or writing your proposal. Don't be shy. Get as much information as possible. If you are applying to an existing program, try to get a list of the successful grantees in your area. Contact the current grantees and ask them about their experience when they applied. Did they do anything wrong that had to be corrected? Was anyone they talked with particularly helpful? You can also contact your local or state homeless coalition and ask if they or another organization can provide some grant writing or other technical assistance. They may have some publications on the subject. Ask the coalition if they know of any groups that have been denied recently and why. Do they know of any model programs? In talking with your local or state coalition or other providers, try to gather as much information about what are currently considered the best or most successful methods of providing services in projects similar to your own.
6. If you need local government approval (e.g., signatures of officials, zoning permits) for your project, start to work on this as soon as possible. It often takes longer than you anticipate.
7. In actually writing the grant application, remember to follow the instructions carefully. Answer all the questions thoroughly but be sure to stay within the required page limit. Assume the reader knows nothing about your program. If you cannot answer a question, explain why.
8. If your organization has a proven track record in providing the services included in your proposal, by all means provide this information. This raises the important point of keeping statistics, which are necessary

when you are trying to document what your agency has done. Keeping detailed and accurate statistics may be a dreaded task for direct service providers, but it is important when seeking funds from almost any source.

9. If you are not an experienced grant writer, ask someone who is to review your proposal. If an experienced person is not available, contact your local or state coalition for the homeless and ask them to review the proposal or suggest someone who can. If all else fails, simply have a few people who work in an area related to your project read the proposal and make comments. Remember, not every organization that wins a federal grant has an experienced grant writer on staff.

10. Obtain current letters of commitment and letters of support, which are generally required in federal grant proposals. Letters of commitment are statements by other organizations describing services or assistance that they intend to provide to the project. For example, a job training program may provide a letter of commitment stating that a number of slots in their program will be reserved for homeless families from your program. It can be very helpful to get other agencies to commit to support your project. It shows they believe in your project and that efforts of different organizations are being coordinated.

    Letters of support from other organizations, government officials, and individuals in the community verify that you are well respected, provide a critical service, and are known in your community. One service provider stated that it is important to get letters of support from all the "major players." Remember to ask your local elected officials or your congressional representatives for letters of support. This may not be necessary to be successful, but letters of support from important political figures won't hurt your chances.

11. Relax. If writing a federal grant proposal sounds complicated and time consuming, that is because it is. However, it can be done. Some who work with homeless families and children have received federal grants to support their projects. This monograph gives you further insight into how these providers were able to get access to this funding.

Private Sources of Funds

Proposals are often needed when applying for grants from private organizations as well. The following general tips on writing a good proposal are reprinted by permission from The Ohio Coalition for the Homeless' *Lives in the Balance: Establishing Programs for the Homeless*, p. 32:

1. Personalize your proposal to each foundation or agency.
2. Have one person write a draft, have a committee review it, and then prepare a final version, if time permits.
3. If the proposal is long (10 or more pages), include a table of contents.
4. Graphs, captioned photographs, or charts can be included.
5. Follow any suggested format as closely as possible.

6. Make it clear how the project fits into the funding organization's areas of interest. Include a budget with income items labeled "received", "requested", and "pending."
7. Emphasize how the project will benefit the homeless you serve.
8. Include copies of five or more current letters of support from a variety of recognized community leaders. It is best if the letters are specific to this proposal.
9. Emphasize the positive, write in the third person, do not be afraid to use emotional words, mention the amount of money you are requesting early in the proposal, have a strong introduction and conclusion, use short paragraphs, tell a story about how your project has helped someone, and be concise.

Assistance

For further assistance on developing a proposal, you may want to consider attending a workshop on proposal writing. The Grantsmanship Center holds workshops in about 100 major cities around the country several times during the year. Anyone interested in proposal writing can attend, and participants are usually from different fields (the arts, education, social services, and so forth). A 3-day workshop focuses on writing a proposal, and participants are asked to bring a sample or to develop a new proposal at the workshop. A 5-day workshop covers several areas including writing a proposal, how to research funding sources, and long-range planning for an organization.

These workshops may be expensive for a struggling, nonprofit organization. Both the 5-day and 3-day workshops cost several hundred dollars per participant. However, you can try to get a foundation to cover the cost of sending someone from your organization. Contact the Grantsmanship Center for information on their limited number of half scholarships. Also ask about sponsorship. For example, if a group of organizations sponsors a workshop in the area and you can get 16 participants to attend at the full price, see if additional participants can attend free.

If you cannot raise the money to go, take heart. It is not a must to attend a workshop. Many less-expensive resources are available to you: books and other publications on proposal writing that may be available at your library, the Foundation Center (see appendix), or through other organizations; experienced grant writers may be willing to assist you; and finally, organizations may provide technical assistance for free or at minimal cost (e.g., coalitions for the homeless).

The Benefits of Working in Coalitions

Coalitions of groups providing services to the homeless can be found in many parts of the country on the local, state, regional, and national level. Several states have networks of runaway and homeless youth providers. These groups are usually associations of shelter providers and staff from other nonprofit agencies, but they may also include representatives from local government. The networks vary greatly. The level of activity and the degree of influence of these groups may also vary.

Many service providers emphasize the importance of working with existing coalitions, networks, or other coordinating groups for the homeless (or forming them if your area has none). The benefits can be wide ranging:

- Coordination of programs—federal funding often requires coordination of services to avoid duplication and to improve the quality of services.
- Information and knowledge exchange—service providers can share information on what works and what doesn't in their programs, increasing the potential for developing model programs.
- Shared resources and reduced competition—last year, the Michigan runaway network decided to divide the funding they received equally among the programs in their state (after a fire in one of the shelters, the network agreed to give more money to that program facing a crisis).
- Enhanced information gathering—collecting and sharing data are useful for lobbying government officials, educators, and the public, and for raising money (by documenting the scope of the problem).
- Broad representation to serve as a ready-made organizing group—for example, the Ohio Coalition for the Homeless, the Ohio Housing Coalition, and other groups around the state launched a campaign in 1989 to lobby the state government to allocate funds for housing for the homeless. According to the Director of the Ohio Coalition for the Homeless, "The only way to get the state government to give funding is to get constituent groups to let their elected representatives know that they need funds." An important part of this campaign was convincing people to make phone calls and write letters to the Budget Committee Members of the House of Representatives and Senate of Ohio. The campaign was a success, resulting in a $22 million package appropriated for fiscal years (FY) 1990 and 1991.
- The development of leadership—for example, the Urban Institute recently surveyed local homeless providers in six states and found that, generally, the state governments did not provide leadership in this area nor did they have comprehensive plans for services. State agencies are required to submit applications to obtain funds from certain federal programs, and if they are not willing or able to apply, opportunities may be missed. A strong state coalition can work with the state government to help ensure that all opportunities for funding and program development are considered.

Federal Funding Specifically for the Homeless—The Stewart B. McKinney Act

Until recently, the federal government considered helping the homeless to be the role of philanthropic organizations and nonprofit service providers. The tremendous increase of homelessness in recent years has prompted a different federal response. Some funding programs specifically for the homeless have been created and, in recent legislation, the homeless have been targeted in several federal programs designed to serve the poor in general. This document provides information on the major federal programs specifically for homeless families and youth, and other federal programs aimed at low-income populations that may be used by homeless families or youth. Addresses and contact persons for the federal agencies that conduct the programs discussed are provided in the appendix.

The Stewart B. McKinney Act, P.L. 100-77, originally known as the Urgent Relief for the Homeless Act, was introduced in Congress in January 1987 and signed into law in July 1987. Although the initial bill primarily focused on emergency needs of the homeless, the final bill includes some long-term approaches toward dealing with the problem of homelessness in America. The Stewart B. McKinney Homeless Assistance Amendments Act of 1988, enacted on November 7, 1988, reauthorized the original programs with some specific amendments. The Act comprises 20 different programs and is the first comprehensive law addressing the problem of homelessness in our nation (see exhibit 1).

Exhibit 1. McKinney Act Programs

- Title I: Brief Statement of the Purpose of the McKinney Act
- Title II: Interagency Council on the Homeless
- Title III: Emergency Food and Shelter Grants, Federal Emergency Management Agency (FEMA)
- Title IV: Housing Assistance
  - Subtitle A - Comprehensive Homeless Assistance Plan (CHAP)
  - Subtitle B - The Emergency Shelter Grants (ESG) Program
  - Subtitle C - Supportive Housing Demonstration Programs
    - Section 1. Transitional Housing Demonstrations
    - Section 2. Permanent Housing for Handicapped Homeless
  - Subtitle D - Supplemental Assistance for Facilities to Assist the Homeless (SAFAH)
  - Subtitle E - Section 8 Assistance for Single Room Occupancy Dwellings
- Title V: Identification and Use of Surplus Federal Property
- Title VI: Health Care for the Homeless
  - Subtitle A - Primary Health Care and Substance Abuse Services
  - Subtitle B - Community Mental Health Services
    - Section 611. Mental Health Services Block Grants
    - Section 612. Community Mental Health Services Demonstration Projects for Homeless Individuals Who Are Chronically Mentally Ill
    - Section 613. Community Demonstration Projects for Alcohol and Drug Abuse Treatment
- Title VII: Education, Training, and Community Services Program
  - Subtitle A - Adult Education for the Homeless
  - Subtitle B - Education for Homeless Children and Youth
    - Section 3. Exemplary Grants Program for Homeless Children
  - Subtitle C - Job Training for the Homeless
    - Section 1. Demonstration Programs
    - Section 2. Homeless Veterans Reintegration Projects
    - Section 3. Job Training Partnership Act Amendment
  - Subtitle D - Emergency Community Services Homeless Grant Program
  - Subtitle E - Youth Homelessness Study
- Title VIII: Veterans Provisions (Conversion of Veterans Administration Space to Domiciliary Beds)
- Title IX: Aid to Families with Dependent Children; Transitional Housing Demonstrations

Understanding the McKinney Act

According to the Congressional statement of purpose, the McKinney Act was passed to:

1. establish a federal Interagency Council on the Homeless,
2. better coordinate public resources and programs to meet the needs of the homeless of the nation, and
3. provide funds for programs to assist the homeless, with special emphasis on elderly persons, persons with disabilities, Native Americans, and veterans.

Local providers should have a thorough understanding of the McKinney Act, because its programs are the primary source of federal funding for the homeless. This monograph provides general information on the McKinney Act, with more detailed information on selected programs that provide funding for services (case management, child care, health care, and so forth). A brief description of each program and how the funding is disbursed is given. How the funding in one state—Ohio—was distributed is described. Ohio has one of the most active and influential nongovernmental state coalitions for the homeless, and it has been successful in getting McKinney Act funds. The Ohio experience gives some useful examples and insights into how the federal money filters down to local providers. Examples from other states are included when their programs focus on homeless families or youth.

Availability of Funds

Every 2 years, Congress authorizes levels of funding for the various federal programs included in the McKinney Act. These authorizations totaled $442 million in FY 1987 and $616 million in FY 1988. These authorizations are ceilings on the amount of money that may be spent for each program. The availability of funds is actually determined by separate appropriation bills passed each year. Congress frequently has been known to authorize a program but fail to appropriate any money for it.

Table 1 shows the amounts authorized for McKinney Act programs in FY 1987-89 and the amounts actually appropriated. Over the 3 years, $1.7 billion was authorized, but only $1 billion was appropriated. For FY 1990, $675.8 million was authorized; $607.37 has been appropriated.

Coordination of Programs on a State Level

Prior to the McKinney Act, some states formed coordinating councils, task forces, or working groups made up of state agency staff involved with the homelessness issue. In other states, government coordinating groups formed in response to the McKinney Act. These groups are very important in the implementation of McKinney Act funding in the states, and it is useful to determine the type of organizational structure that exists in your particular state.

In Ohio, the coordinating council is called the Homeless Cluster. It was formed in 1985 by the governor and focused originally on homeless mentally ill

Table 1. Stewart B. McKinney Homeless Assistance Act Program Funds, FY 1987-90

(in millions of dollars)

	FY 87		FY 88		FY89		FY 90	
	Auth	Appr	Auth	Appr	Auth	Appr	Auth	Appr**
Health and Human Services								
Primary Health Care	50.0	46.0	30.0	14.4	61.2	14.8	63.6	46.0
Mental Health Demonstration	10.0	9.3	0.0	0.0	11.0	4.6	11.5	6.1
Mental Health Block Grant	35.0	32.2	–	11.5	35.0	14.1	35.0	35.0
Alcohol and Drug Abuse Demonstration	10.0	9.2	0.0	0.0	14.0	4.5	17.0	10.0
Community Services Block Grant	40.0	36.8	40.0	19.1	42.0	18.9	42.0	35.0
AFDC Demonstration					–	–	20.0	20.0
Department of Labor								
Job Training	–	–	12.0	9.5	13.0	9.4	13.0	10.0
Jobs for Employable Dependent Individuals	–	–	–	–	0.0	0.0	7.2	0.0
Department of Education								
Education for Homeless Children and Youth	5.0	4.6	7.5	4.8	5.0	4.8	5.0	5.0
Adult Literacy	7.5	6.9	10.0	7.2	10.0	7.1	10.0	10.0
Exemplary Education Grants	–	–	–	–	2.5	0.0	2.5	2.5
Housing and Urban Development								
Emergency Shelter Grants	100.0	50.0	120.0	8.0	120.0	46.5	125.0	73.8
Transitional and Supportive Housing	95.0	80.0	100.0	65.0	100.0	80.0	105.0	128.0
Supplemental Assistance (SAFAH)	25.0	15.0	25.0	0.0	10.0	0.0	11.0	10.8
Section 8	35.0	35.0	35.0	0.0	50.0	45.0	50.0	73.8
Federal Emergency Management Administration								
Emergency Food and Shelter Program	15.0	10.0	124.0	114.0	129.0	114.0	134.0	131.9
Veterans Administration								
Surplus Property	20.0	15.0	0.0	0.0	–	–	–	–
Mentally Ill Veterans	–	–	0.0	0.0	15.0	0.0	15.0	15.0
Domiciliary Care Program	–	–	0.0	0.0	15.0	0.0	15.0	15.0
Department of Agriculture								
Food Stamps	0.0	0.0	60.0	60.0				
Temporary Emergency Food Assistant Program	0.0	0.0	50.0	50.0				
Interagency Council	.2	.2	2.5	*	1.1	1.1	1.2	1.2

* $750,000 taken from Supportive Housing Program

** Amounts appropriated by the House of Representatives and yet to be reviewed by the Senate.

Source: National Coalition for the Homeless, Washington, DC, Sept. 1989.

persons. The group's initial activity generated changes in state policy toward the homeless and helped secure funding from the Robert Wood Johnson Foundation to establish health care programs in four Ohio cities. Activity waned until passage of the McKinney Act, when a working group was formed and began to meet regularly. The working group is made up of representatives from Health, Mental Health, Rehabilitative Services, the Governor's office, Bureau of Employment Services, Housing Finance Agency, Department of Development, HUD, and the Ohio Coalition for the Homeless. The cluster is chaired by the Department of Development, which administers housing-related programs. In the past, the Department of Mental Health served as the lead agency.

The purpose of the Homeless Cluster is to share information, alert providers to the availability of funds, and oversee state-administered McKinney Act funds. Members take part in the development of the state plan necessary for the implementation of McKinney Act programs. For example, the Ohio Department of Mental Health develops the state plan for allocating funds given to Ohio by the Mental Health Services Block Grant Program. Members of the cluster also decide how certain state and federal funds will be distributed, and they sometimes sit on the peer review panels that evaluate grant applications.

The Comprehensive Homeless Assistance Plan (CHAP)

To be eligible for any McKinney Title IV Program (Housing Assistance) funds, every state and entitlement city or county must submit a Comprehensive Homeless Assistance Plan to HUD. The CHAP must include at least the following:

- A statement about the need
- A description of how facilities and services will be used to meet the needs of the homeless
- An overall strategy of how McKinney assistance will complement and enhance available services and facilities for all of the homeless (including the elderly, families, mentally ill, veterans)
- A contact person or agency for information on the contents of the CHAP
- Assurances that recipients and sponsors will administer, in good faith, a policy designed to ensure that the homeless facility is free from illegal use, possession, or distribution of alcohol or other drugs.

The states may also include the following in their CHAPs:

- A description of the coordination of job training projects

So that states can include local needs and resources when they write their CHAPs, the entitlement cities and counties are now required to submit their CHAPs to the state, as well as HUD, 45 days prior to the deadline for the submission of the state CHAP. Although it is not required, a state agency usually takes the lead in developing the CHAP. Frequently, this agency is the Department of Human Services. In Ohio, the Department of Development contracted with the Ohio Coalition for the Homeless to write the CHAP.

In a study of the implementation of the McKinney Act in six states, the Urban Institute reported that many homeless service providers felt that their state CHAP did not function as an overall plan for the state. On the other hand, in some states, homeless service providers found their comprehensive plan to be quite useful. Getting a copy of the CHAPs for your city, county, and state should be the first step in seeking funding under the McKinney Act.

The regulations for the CHAPs will be significantly modified in the spring of 1990 so that, within 3 years, the information contained in the CHAP will be more detailed and prescriptive. For instance, the demographics on the homeless population in a state or locality must be increasingly specific, and the strategies and approaches for how McKinney funds will be used must be fully described.

The Emergency Shelter Grants Program (ESG)

The Emergency Shelter Grants Program was set up to improve existing shelters for the homeless, to help open additional shelters, to help pay for essential social services for the homeless, to help offset the operating costs of shelters, and to provide services or activities to prevent homelessness. States and entitlement cities and counties are eligible for direct grants from HUD. To apply, the state or entitlement city or county must have a HUD-approved CHAP.

For the purposes of this monograph, only eligible activities focusing on services are described. Under the ESG program, funds for social services must be limited to 20 percent of the grant unless a waiver is granted by HUD. Up to 10 percent of the funds for prevention can be made available to local government or nonprofit agencies within 180 days of the grant award. The recipient local government or nonprofit organization has 30 days to obligate the funds and 180 days to spend it (these terms run simultaneously). Waivers can be granted if an applicant can show that activities other than the essential services are being adequately provided by other public or private resources. Grants given to local governments can be used for essential services only if the service is new or represents a quantifiable increase in the level of service provided by local government in the past year.

The following activities can be funded under the ESG program:

- Homelessness prevention efforts such as financial assistance to families with eviction notices or utility terminations, first month's rent, or security deposits
- The provision of essential social services including, but not limited to, case management, counseling, employment assistance, health, substance abuse counseling, education, or food
- Payment of certain operational costs (e.g., rent, maintenance, insurance, utilities, furnishings)
- Minor renovation, provided the facility is operated as a shelter for 3 years, or major rehabilitation, provided the building is operated as a shelter for 10 years

The ESG program requires that federal dollars given in a grant be matched on a dollar-for-dollar basis by the recipient. The match may include the value of any donated material or building, the value of volunteer services (calculated at $5.00 per hour), and funds from other sources.

The amount of funding each state or entitlement city or county receives is determined by the formula used by the Community Development Block Grant Program, which considers several factors including the extent of poverty, population, housing overcrowding, age of housing, and growth lag in relationship to other metropolitan areas. Once a state or entitlement city or county has been notified (in the *Federal Register*) of the amount of their grant, they have 45 days to submit their ESG application, explaining how their funds will be used. Local government may carry out the eligible activities themselves or they may contract with private nonprofit organizations to carry out all or part of the activities.

States are required to outline how they will make funds available to local governments, or they can simply provide a list of the cities that are to receive funds. Entitlement cities that have a direct allocation from HUD are still eligible to receive funds from the state's allocation. States may also distribute funds directly to nonprofit organizations as long as certification of approval for the project (signed by the appropriate official in the local government) has been obtained by the nonprofit organization. In Ohio, although the unit of local government submits the application, many times the nonprofit organization actually prepares the application and the mayor or other appropriate official signs it.

According to ESG regulations, a grant made to a state must be made available to local government within 65 days, and the local government or nonprofit agency receiving the funds has an additional 180 days to obligate the funds. Entitlement cities and counties who receive a direct allocation from HUD are required to obligate those funds within 180 days of their receipt. The funds must be spent within 24 months of the time the state was awarded the grant. Since this program was developed to provide emergency grants, specific deadlines were imposed to ensure that this money would not get lost in the bureaucracy. In spite of this, some states report delays in this emergency funding.

Grants awarded by state or local governments to nonprofit organizations vary in amount depending on the funding available and the need of the applicant. According to the National Coalition for the Homeless, every locality around the country that was polled reported that the demand for ESG greatly exceeded the available ESG funds. Many local governments did away with the competitive grant process and simply divided the money among the existing providers.

In Ohio, in addition to physically improving facilities, funds were used to develop services desperately needed by families. For example, a shelter in Zanesville used funds to provide day care for children so that parents could look for work and for permanent housing. Another shelter in Dayton was able to provide case management services to 75 residents. The city of Columbus's Housing Law Project received ESG funds to provide legal assistance to people facing eviction. This is allowed under the homelessness prevention category of the ESG regulations.

Emergency shelter is not defined precisely in the ESG regulations. Both "on site" and "scattered site" transitional housing projects in Minnesota were awarded ESG funds to provide services. In general, transitional housing means providing housing for anywhere from 1 month to 2 years along with some form of supportive services such as case management, employment counseling, and other services. "On site" transitional housing refers to projects that own or lease several units in one building where families or individuals live and services are provided. "Scattered site" transitional projects provide housing by buying or leasing one or two units in several different places and providing some type of support services to the families or individuals placed there. Some of these programs lease the units in the program's name and provide a rental subsidy and support services for a certain period of time, after which the family or individual is expected to take over the lease. Other programs provide a rental subsidy and support services for a certain period of time, but the families or individuals lease the units themselves. Other scattered site programs may operate somewhat differently. These programs (scattered sites) cannot be funded through the Transitional Housing program of the McKinney Act because of certain regulations.

According to the Ohio Department of Development, the biggest problem with this program is that the money does not come out regularly. Providers are sometimes not aware of when funds are available, or the funds become available before the previous funding has been exhausted, making planning difficult. Local governments have not done a good job of informing local providers of the availability of these funds. A lesson to be learned from this is: service providers should not wait for their local governments to inform them of the availability of funding.

Supportive Housing Demonstration Programs—Transitional Housing Demonstration

The purpose of the Transitional Housing Demonstration component of the Supportive Housing Demonstration Program is to provide temporary housing plus support services in innovative ways to homeless persons. The ultimate goal is to enable people to live independently. Private nonprofit organizations, government entities, urban counties, metropolitan cities, and the states are eligible to apply directly to HUD for a grant or advance under this program. There is a 50-percent matching fund requirement.

The following activities are eligible for funding under this program:

- Annual payments (for 2 years) for operating costs of up to 75 percent for transitional housing, and up to 50 percent for 3 years after that. This includes staff salaries and supportive services (e.g., case management, job counseling, day care, substance abuse counseling) that address the special needs of homeless families and individuals.
- A grant of 50 percent of the cost of establishing and operating a jobs program that includes employing residents to help operate and maintain the housing project and paying for transportation to other jobs.

Existing programs can apply for funds under the Transitional Housing program only for operating expenses for expansion to serve more clients, a change in the use of their building (e.g., from shelter to transitional), or an increase in the services provided or when improvements are needed to meet health and safety standards. Funds for acquisition and rehabilitation or for the payment of outstanding debts for these activities will be given on a one-time basis if the structure was not used for supportive (transitional) housing before the application was submitted.

Since the passage of the McKinney Act, considerable funding has been appropriated for this program in comparison to some of the others (SAFAH, Mental Health Demonstration Projects for the Chronically Mentally Ill, and so forth). This is an important program for nonprofit organizations working with homeless families to consider. Many families living in shelters need supportive services such as case management, employment assistance, counseling, and child care. Transitional housing provides these families with short-term housing (up to 24 months or longer, at the discretion of the program) and the needed supportive services to prepare them for permanent housing. Organizations not interested in housing can arrange to provide the services in conjunction with another organization that develops the housing.

A transitional housing project cited as innovative by HUD is in Baltimore, MD. What makes the Transitional Housing Program unique is the extensive partnership among the private and public sector in providing the necessary resources. Two buildings (former schools) with 73 apartment units were developed through a creative, cooperative effort between a private developer, several city agencies, a private housing corporation, nonprofit organizations, community associations, and a housing consultant.

In FY 1987, the project received a $1.3 million grant for 5 years for operating expenses for the project. The city supports the program by providing subsidies for day care for every child in the program (up to $2,500 per year) and, through rental allowances, providing income subsidies for rent for up to 18 months for families in the program. The fact that investors were able to take advantage of tax credits served as an incentive for program participation. A private donor provided funding for infant day care. The Abel Foundation gave funds to use for a recreation center for children.

Each of the two apartment buildings has a program coordinator and two counselors who provide a wide range of services including case management, employment counseling, and support groups. A family support center for disadvantaged families in the community serves as a prevention program. A Head Start program has been set up for children. The director attributes the success of the program to the ability of the housing consultant to blend funding from a variety of sources and to bring people together to work cooperatively for the program.

The director of the Ohio Coalition for the Homeless cited the biggest problem Ohio applicants have had in applying for this program is coming up with the required 50-percent matching funds. For this reason, the Ohio Coalition and others launched a major statewide campaign to lobby the state legislature to appropriate state funds for transitional and permanent housing development (shelter, transitional and permanent). The campaign was successful, and some state funding has been designated for housing initiatives for the homeless. It is hoped that these funds can be used in the future to match available federal funds through the McKinney Act.

A housing consultant from Ohio warns that developing a budget and financing package for this type of project is a sophisticated undertaking that is difficult unless you are experienced in housing development, zoning, and so forth. He suggests that groups use a housing consultant for the development phase of the project. The appendix lists organizations that provide information and technical assistance on transitional housing. Relevant publications are listed in the bibliography.

Bethany House in Cincinnati, OH, operates a transitional housing program for families; a McKinney Act grant covers staff salaries and program expenses. The required matching funds were secured through private sources (religious, individual, and so forth). Through a collaborative agreement with the St. Vincent De Paul Society, Bethany House provides all of the social services (intake from the shelters, case management, employment counseling, referrals, and so forth) and the society manages and maintains the housing. The residents pay rent to the society, but this does not cover the operating costs of the building, which are met by revenue from thrift stores run by the society as well as from private donations.

Supplemental Assistance for Facilities to Assist the Homeless (SAFAH)

The purpose of the SAFAH program is to provide funding for comprehensive and innovative programs that help homeless families and individuals become self-sufficient and to provide an additional source of funds for gaps in need not covered by the ESG or Supportive Housing Demonstration Programs. A representative from HUD emphasizes that comprehensive programs are given priority over applications for money to cover gaps in the ESG and SHD programs. At least 50 percent of the funds awarded across the nation for this program must be used for activities benefiting homeless families and/or elderly homeless persons.

The following activities are eligible for funding under this program:

- Support services, such as child care and counseling
- Operating costs
- Interest-free advances for leasing, renovating, substantially rehabilitating, or converting facilities for the homeless
- Moderate rehabilitation of existing structures

The regulations for this program are similar to those of the transitional housing program. One important difference is that no funds are required to match federal funds received under this program. However, projects that are able to leverage resources from other sources are given preference when they apply.

Nonprofit organizations, cities, counties, and states are eligible to apply for SAFAH grants. These entities may also submit joint applications. In FY 1987, 44 grants were awarded. In FY 1988 and 1989, although funds were authorized, no money was appropriated for this program.

Grantee's programs represent a wide range of activities, from starting up a transitional shelter, to rehabilitating an emergency shelter, to expanding support services such as day care and job counseling. The theme of the successful projects seems to be the development of comprehensive services along with housing. Grantees include a city agency working in collaboration with nonprofit organizations, two experienced nonprofit groups providing service jointly, and a private nonprofit agency working with the support of several other agencies.

SAFAH grants are used by organizations in combination with other funding sources including religious, foundation, corporate, county, city, individual, and in-kind support of goods and services. The United Way of Northern Nevada and the Sierra received $332,541 to establish the Homeless Outreach and Mobilization Effort (H.O.M.E.) program, which serves recently homeless families and children. In addition, it received a Gannett Foundation grant of $120,896 plus in-kind contributions. Local merchants, unions, and businesses constructed a $145,000 building to house the outreach program. The H.O.M.E. project is now being incorporated as a nonprofit agency to continue working with the recently homeless who have lost their jobs or who are looking for work.

Health Care for the Homeless Program

The purpose of this program is to provide primary health care services, treatment for alcohol and other drug abuse, and case management to homeless persons. Eligible applicants are public and private nonprofit organizations, with preference given to applicants with experience in providing direct services (primary health care or substance abuse treatment) to the homeless or medically underserved populations.

Grantees must provide the following, either directly or through contracts:

- Primary health and substance abuse services at locations accessible to the homeless
- Emergency health services on a 24-hour basis
- Referrals to hospital or mental health services when necessary
- Street outreach services to inform homeless individuals of the availability of services
- Assistance in establishing eligibility for, and in obtaining, other needed services under entitlement programs.

Although not required, grantees may use funds to provide mental health services and dental, eye care, or podiatry services to the homeless when medically necessary. Residential treatment for substance abusers may also be provided under this program. This program cannot be used for the following: inpatient services, cash payments to recipients of services, the purchase or improvement of property (other than minor remodeling), or the purchase of major medical equipment. The required services should be provided using a case management approach or similar case coordination system to ensure that comprehensive health care services are provided and integrated with substance abuse services.

These services must be provided to any homeless person despite his or her medical insurance or income. In addition to those who are currently homeless, services may be provided to residents in transitional housing and formerly homeless persons for up to 1 year after they move to permanent housing. Grantees must participate in the state Medicaid program if they are eligible.

New grantees must match 25 percent of the federal funds received in the first year (i.e., for every $3 from the federal source, the grantee must obtain $1 from another source). The $1 may be in cash or in facility, equipment, or services. This match increases in the second or subsequent year to 33.3 percent of the federal funding received (i.e., for every $2, $1 must be provided from other sources).

No new grants were awarded for FY 1989 or FY 1990. Applications for FY 1990 money were accepted from both existing grantees and new applicants in September 1989. Congress appropriated $34.1 million in FY 90 funds to cover grantees for the first 9 months of calendar year 1990, and $11.8 million advance appropriation for FY 1991 to cover the last 3 months of the calendar year. The latter amount of funding will only become available in October 1990 (FY 1991).

The $34.1 million originally appropriated for FY 1990 was further reduced to approximately $32 million by the Gramm-Rudman sequestration, the required 1 percent set-aside for evaluation, and the use of funds to extend grantees with December 1 start dates an additional month to put all grantees on a 9-month funding basis. This effectively reduced the operating level for the program on an annualized basis from $47 million in FY 1989 to $42.8 million in FY 1990, a reduction of $4.2 million.

Approximately $31.5 million was awarded to existing grantees for the first 9 months of 1990. Because of the limited funds available, no new applicants were funded, and 17 of the 108 programs were funded for 3 months with "phase-out" grants to ensure the provision of current levels of service throughout the winter months. Funding for this program has been authorized for FY 1991, and another competitive cycle may be opened to new applicants.

In FY 1987, $46 million was appropriated and 109 projects were awarded 2-year grants. The 19 projects in cities around the country that were established as "Health Care for the Homeless" centers through the Robert Wood Johnson Foundation Initiative all received grants under this program. Approximately half of the projects funded were community health centers established by section 330 of the Public Health Service Act to provide comprehensive primary care to medically underserved populations. The remaining projects were nonprofit, community-based organizations or local government agencies.

The grantees funded in FY 1987 present a diversity of program designs. They encompass networks of several agencies that provide services, single agencies that operate one major clinic and other satellite clinics, and organizations that provide services through subcontracts or agreements with other organizations.

Ohio received $1,926,656 from the Primary Health Care and Substance Abuse Program for four programs providing health care to the homeless:

- Federation for Community Planning (Cleveland)
- ECCO Family Center (Columbus)
- Cincinnati Health Network (Cincinnati)
- Cordelia Martin Health Center (Toledo)

These grantees all provide highly coordinated operations. In fairly large cities, a well-coordinated system of providers with a good outreach component and the ability to serve a broad geographic area seems to be the best way to secure funding under this program.

For example, the ECCO Family Health Center is a comprehensive, independent nonprofit primary care facility that has operated for more than 18 years. Prior to the McKinney Act, the director of the center and several shelter providers in the area had formed an informal coalition whose members were concerned about health care services for the homeless in Columbus. The group, led by the ECCO Family Health Center, applied for funding from the Robert Wood Johnson foundation, but was denied because it had not designed a unified program. Despite this, ECCO began its effort to bring health care to the homeless.

When McKinney Act funds became available, the original core group of shelter providers and the ECCO Center invited all related organizations—substance abuse, social service agencies, hospitals, Community Action Agencies (CAAs), and food pantries—to meet to discuss applying for the McKinney funds. The group agreed upon the concept for their proposal and then set up subcommittees (mental health, substance abuse) made up of individuals with expertise in those particular areas. The subcommittees designed the specific programs within the overall agreed-upon concept.

The ECCO Family Health Center works with city alcohol control officers to enroll alcoholic homeless persons in detoxification and substance abuse counseling programs. A large emergency shelter runs a substance abuse program. A women's shelter provides health screenings and assessments through a nurse case manager and a social worker. Because of the growth in the number of homeless families, the number of children needing services has increased. The ECCO Family Health Center has developed comprehensive perinatal services that include children's mental health services, mother/infant stimulation (bonding) sessions, and full service followup pediatric care.

Another example is the Cordelia Martin Health Center, a federally funded Community Health Center in Toledo. When McKinney funding became available, a citywide meeting of service providers who work with the homeless was convened by the city's Council on Human Services. The regional director from the state Department of Health and Human Services explained the grant application to the group and encouraged a unified approach behind a lead agency that would submit one application from the city of Toledo on behalf of the group.

The Cordelia Martin Health Center provides health care assessments in the shelters through its outreach program, which is staffed by a nurse case manager and nurse clinicians. Acute and chronic ailments are referred to the family practitioner at the clinic; transportation is provided. To provide drug rehabilitation, detoxification, dental, and primary health care services, Cordelia Martin subcontracts with 10 Toledo-area health care providers.

In Los Angeles, services are provided throughout the city through a network of eight agencies: three community health centers (Northeast Valley Health Corporation, the Watts Health Foundation, and the East Los Angeles CHC), High Risk Youth Program of Children's Hospital of Los Angeles, the UCLA School of Nursing's Rescue Mission, the Los Angeles Homeless Health Care Project, West Oakland Health Center, and the Venice Family Clinic. All these agencies specialize in serving one or more of the different subgroups (families, runaway youth, Hispanics, Blacks, and Whites) of the homeless population in Los Angeles.

The Venice Family Clinic Homeless Services, originally funded through the Robert Wood Johnson Foundation, provides health services to homeless people on the west side of Los Angeles, including onsite services at the largest family shelter in Los Angeles County. Homeless individuals and families can walk in any weekday and receive services (screening, case management, laboratory work, medications, examinations, and some specialty services). The clinic has a good relationship with the local shelter, with regular communication and cooperation. Once a week, a team of medical and other staff set up clinic services in the shelter. Children and adults who need medical services are seen. The children are screened for growth or development problems, lack of immunization, and acute and chronic medical problems. Followup services are provided at the clinic the next day. The clinic staff works closely with a public health nurse who visits the shelter several times a week to aid pregnant women, prevent the spread of diseases (hepatitis, sexually transmitted diseases, and so forth), and prevent child abuse through identification and monitoring of families who are high risk. The clinic staff, in conjunction with the public health nurse, monitors high-risk families and illness levels among the shelter residents. In this way, the Venice Family Clinic and the health department work together to ensure that a full range of preventive and primary care health services are available to families at the shelter.

The Swope Parkway Health Center in Kansas City, MO, a community health and mental health center, has developed some special services for homeless families and children. A coalition of shelter providers and other community agencies working with the homeless developed the center using local funds. Swope Parkway contracts with two smaller agencies to service a wider geographic area. The center provides extensive outreach with a 40-foot mobile recreational vehicle that serves as a miniclinic. The mobile unit visits many shelters, a day care center for homeless children, soup kitchens, and other organizations each week. The children receive health care services such as assessments and immunizations. The case managers from Swope Parkway began a parenting support group for mothers that provides information on children's health care needs, child development, entitlement benefits (AFDC and so forth), budgeting, social skills, and how to locate permanent housing. The van demonstrated a need to provide more services, particularly for children. Therefore, the SWOPE Parkway Health Center established a clinic in one of the day care centers.

An excellent source of information about health care for the homeless is *Streetreach*, a newsletter produced by the National Association of Community Health Centers.

Community Mental Health Services Block Grants

The purpose of this block grant program is to provide community mental health services to chronically mentally ill homeless persons. Eligible applicants are state agencies (usually the state Department of Mental Health) designated to administer the Mental Health Block Grant Program in all 50 states, the District of Columbia, Puerto Rico, and the territories. Funds are allocated according to a formula based on the proportion of the state's population in urban areas relative to that of the whole country, with each state receiving a minimum of $275,000.

To receive Block Grant funds, states are required to provide the following community mental health services, but not necessarily all services at each site:

- Outreach
- Community mental health, diagnostic, crisis intervention, and habilitation (to teach basic life skills), and rehabilitation services
- Referral for hospital and appropriate primary health care and substance abuse services
- Training to outreach workers and individuals who work in shelters, mental health clinics, and other sites where homeless people receive services:
    - Identification of individuals who are chronically mentally ill
    - Referral of these individuals to available services, including job training, literacy education, community health and mental health centers, and substance abuse treatment programs
    - Identification of and referral to benefit programs
- Case management
    - Preparation and review of treatment plans at least every 3 months
    - Assistance obtaining and coordinating social and maintenance services
    - Assistance obtaining income support, housing assistance, food stamps, Supplemental Security Income benefits, and referral for other appropriate services
    - Under certain conditions, representative payee services for individuals receiving aid under Title XVI of the Social Security Act.
- Supportive and supervisory services in residential settings

The funding from this program can certainly be used to provide mental health services to homeless families. However, because the states and territories have broad discretion, how they use these funds varies tremendously. It is therefore difficult to find out how much of this funding is actually being utilized for homeless families throughout the country.

The first round of funding—$32.2 million—was made available on September 29, 1987. The states, District of Columbia, and Puerto Rico had 1 year to apply for funds. (The territories were not eligible until after the 1988 amendments.) In FY 1988, another $11.4 million was appropriated. All eligible applicants received combined FY 1987/88 allotments ranging from the minimum of $275,000 to the $6,073,586 received by California.

Approximately $14.1 million was approved for this program in 1989. Since this was not enough to pay the minimum allotments, the allotments were changed to $267,944 for states, Puerto Rico, and the District of Columbia, and $48,717 for each of the territories.

To receive FY 1987/88 funds, states were required to create a state Mental Health Service for the Homeless (MHSH) plan for how the funds would be used. Since existing services varied greatly, these plans were quite different. Many states submitted very specific proposals, while others simply outlined a range of services they would consider funding.

The states were also required to determine "high-need areas" where the greatest number of homeless mentally ill individuals in need of services were located. Most states did this by estimating the homeless population in the state, and then, based on local studies, national estimates, and so forth, assumed that a certain percentage of the homeless population were mentally ill. Then they determined the availability of services in these areas. For example, one state did not include a major metropolitan area among its high-need areas because it had already received a National Institute of Mental Health (NIMH) demonstration grant.

States also varied in how they distributed their allotted funds. Some states simply divided the money on a statewide basis using some formula. The majority invited agencies to compete for the funds by submitting proposals that would be evaluated to determine which agencies would be funded. Some states solicited competitive proposals from regions, counties, and cities; others requested proposals from state and nonprofit agencies in high-need regions or counties, while others had a number of high-need regions or counties submit proposals. In some states, proposals were not in competition, but only high-need areas were invited to apply.

Sample criteria on which proposals were judged included:

- Quality
- Plans for coordination with other services
- Ability to provide some or all of the designated services
- Ability to continue the proposed program when the MHSH Block grant funds run out (securing additional sources of funding)
- Ability to provide matching funds
- Demonstrated need for services

As an example of this process, Ohio received $1.2 million for FY 1987 and $529,903 for FY 1988 in MHSH Block Grant Funds. The Department of Mental

Health requested proposals from the state's 53 mental health boards, which serve 88 counties in Ohio. Community Mental Health Board members are usually professionals who work in the mental health or related fields. Also included as members of these boards are persons with mental illness (current or past consumers of mental health services). The mental health boards that receive block grant funding have broad power over how they distribute funds in their counties to ensure that required services are provided. For example, a board can request proposals or it can simply approach an agency that the board feels will do a good job and give it a contract to provide services.

In the first round of funding, 11 mental health boards received funds. In awarding these grants, the Ohio Department of Mental Health looked for projects that were currently serving individuals with severe mental disabilities and that were consistent with the department's philosophy, which emphasizes consumer choice and empowerment, community-based care that is flexible and individualized, and projects that seek to maximize the number of individuals served. Recently, priority has been given to non-facility-based programs that provide services for persons who are homeless and mentally ill and that have strong outreach to the streets.

Community Mental Health Services Demonstration Projects for Homeless Individuals Who Are Chronically Mentally Ill

The purpose of this demonstration program is to provide community-based services to adults with severe and long-term disabilities and to adolescents and children with severe emotional disturbances. Demonstration projects typically require state-of-the-art service intervention, knowledge of the population being serviced, and a strong evaluation component. These projects are expected to test innovative approaches to the provision of mental health services to this population and to make the results widely known throughout the field.

The following activities can be funded under this program:

- Community services
- Outreach
- Crisis intervention on the streets and in shelters
- Case management
- Client advocacy
- Training in daily living skills
- Assistance in finding residential programs

Projects for adults must include:

- Outreach in nontraditional settings
- Staffing and operation of supportive living programs
- Intensive case management

Projects for children must include:

- Screening
- Assessment
- Referral

States applying for funds from this program must do the following:

- Seek input from interested groups (service providers, consumers, families, individuals) in developing and implementing a project.
- Demonstrate the existence of collaborative or new and innovative initiatives among mental health, health, housing, and social welfare agencies that will help create a more integrated service delivery for the target population. The service plan must include the following:
  - Sensitivity to ethnic, racial, and cultural interests and values
  - An evaluation component that assesses the effect of the program on three levels: client, program, and community
  - A plan for continued financial support after the grant period
  - Provisions for preparing a final report on the demonstration project that would enable other states and communities to replicate it
  - Coordination of the project with the state Mental Health Plan

Only state mental health authorities are eligible to apply and compete for funding under this request for applications, but they are expected to solicit guidance from interested groups, including service providers. Providing comprehensive services through a highly coordinated system requires participation on the local level from direct service providers. Several of the state mental health authorities that received grants contracted with local nonprofit organizations to provide one or more of the required services.

To participate in this funding, nonprofit agencies need to know who in the state mental health authority is involved in the planning process for grants relating to the homeless. In small states, you may simply contact your state mental health department for information on the state mental health plan and any current homeless projects focusing on the mentally ill. In larger states, you can certainly try to contact the state mental health authorities for information, but it may be easier to work through your local mental health authority. Coalitions for the homeless and for the mentally ill may be helpful in obtaining information on current mental health planning initiatives on the local and state level.

A total of $9.3 million was appropriated in FY 1987. Thirty-three grant applications were submitted, and 19 were approved by a peer review committee in January 1988. NIMH awarded approximately $8 million for nine projects for adults and approximately $730,000 for three children's projects. All were funded for 2 years. The remaining $600,000 was allocated for a national evaluation and technical assistance efforts. For FY 1989, the limited funds available were distributed only to existing grantees.

The adult projects funded under this program target single, homeless adults who are mentally ill and without a family. Therefore, the focus here is on the three funded projects that target homeless children. They are good program models that providers could try to include in their state plan with funding from the Mental Health Block Grant program.

The Portland Area Homeless Children's Mental Health Project in Maine received a grant of $284,828 to establish a mental health treatment and support services program for adolescents with severe emotional disturbance who are homeless or at imminent risk of becoming homeless. An outreach team made up of two masters-level social workers, a substance abuse counselor, and one vocational services counselor go to a drop-in center and soup kitchen for homeless youth, emergency shelters, schools, and social service and juvenile justice agencies to work with homeless adolescents who need assistance. Team members are employed by different agencies, such as the YWCA, DAY ONE (a substance abuse treatment program), and Cumberland County Training and Resource Center.

Mental health, substance abuse, and vocational rehabilitation (employability) screening, assessment, and treatment/counseling are provided as necessary. Members of the team provide case management for a core of five to eight clients but actually work with a much larger number of homeless adolescents. The program responds to crises on a 24-hour basis and collaborates with a wide range of agencies to provide family planning services, slots in a job training program, housing assistance, welfare, legal assistance, family mediation for reunification, and other support services. The program also has the required evaluation component, which is being conducted by the University of Southern Maine. The project is looking at the characteristics of the collaboration among the various agencies and how they get adolescents involved in order to share what they have learned with others in the field.

This project is truly a collaborative effort between the Maine Department of Mental Health and Mental Retardation (MDMHMR) and a coalition of service providers in Portland. A Shelter Assessment committee, consisting of city managers and nonprofit agency representatives, had met for several years prior to the mental health demonstration grant to evaluate the needs of adults and youth in the shelters. The nonprofit programs urged the committee to focus on the needs of youth. A coalition of agencies from this committee and others worked together to develop a plan for a comprehensive mental health project for children in Portland. The Project's Advisory Board consists of representatives from the City of Portland Health and Human Services, Portland Police Department, United Way of Greater Portland, Preble Street Resource Center for the Homeless, University of Southern Maine Department of Social Work, We Who Care, Mainely Families (a parent organization), service recipients, Cumberland County Child Abuse and Neglect Council, and providers in Portland's Adolescent Services Network. The broad membership on the advisory board and the extensive collaboration (shown by the cooperative work among the various agencies to provide services) help make the Maine project unique. Another important and innovative element is the program design—with several agencies sharing staff and an outside project director coordinating the project.

Project Mental Health for Homeless Youth in Burlington, VT, the only project to receive a third year of McKinney Act funds, received a total of $448,722 over 3 years to do the following:

- Locate and engage homeless youth in Chittenden County via outreach
- Provide ongoing assistance to meet the needs of homeless youth through case management
- Provide mental health services for homeless youth
- Evaluative outreach and case management services

The Vermont Department of Mental Health is contracting with Spectrum, Inc. (a nonprofit entity) to provide all the services for the project. Their goal for year III (ending in April 1991) focuses on developing services for youth to help them in the transition to independent living. After the first year, the project narrowed its focus to serve adolescents specifically because they were the least recognized and most underserved youth population.

An exciting outcome is that Spectrum has received funding from the Gannett Foundation to develop a youth shelter. A psychology professor from the University of Vermont has been given a contract to design and coordinate the project evaluation. Revised data collection procedures are now being implemented. Spectrum, Inc., a multiservice agency, provides individual and group counseling to youth and a transitional independent living center. The staff of Spectrum wrote most of the original grant application.

The District of Columbia Department of Human Services received a grant of $237,979 to establish a Mobile Mental Health Team for Homeless Children and Families. The project uses a family-based approach to treatment that includes parent training groups to stabilize families with emotionally disturbed children and assist them in finding permanent housing. The project's principal site is Washington, DC's intake center for families in need of emergency care and shelter. The team, consisting of a psychiatric social worker and a clinical psychologist, works out of a van that visits primarily the two largest city shelters and a transitional living facility for families (a nonprofit organization). The team conducts mental health screenings and provides any necessary referrals for medical, mental health, substance abuse, or other services. Referrals for shelter, including transitional and permanent housing, are also provided. The team also extensively evaluates the homeless families in the project and the families' use of the mental health services delivered.

In pulling this project together, the Office of Children and Youth Services, part of the DC mental health authority, met with representatives from the Office of Emergency Shelter and Support Services, the city agency that oversees the city-run programs for the homeless, to help with the development and training of staff for the project. The Mental Health Association (private nonprofit provider) and DC Health Care for the Homeless (HCH) provided counsel and advice. HCH makes some referrals from its pediatric outreach team, which also visits the shelters.

As of this writing, $6.1 million has been appropriated for FY 1990. This could result in new projects being funded. The guidelines, priorities, and preferences of this program will be modified in the new funding announcement.

Community Demonstration Projects for Alcohol and Drug Abuse Treatment

The purpose of this research demonstration program is to contribute to scientific knowledge regarding effective interventions for homeless persons with alcohol or other drug problems. Applications may be submitted by public or private nonprofit entities, including universities, units of state and local governments, and other public or private nonprofit organizations.

A total of $9.2 million was appropriated for this program with the passage of the McKinney Homeless Assistance Act in 1987. Nine 2-year grants were awarded at that time through a nationwide competitive grant process to support community-based programs concentrated in geographically diverse urban areas with large homeless populations. An additional $4.5 million was made available in FY 1989. These funds were used for a competitive renewal of the existing grants. For FY 1990, approximately $14 million is available, which will support up to 18 new research demonstration projects.

Adult Education for the Homeless

The purpose of this program, also known as the Statewide Literacy Initiative, is to provide funding to state departments of education to develop and implement basic skills remediation activities and literacy training for homeless adults. Grants are awarded by the U.S. Department of Education.

The state education agency is required to develop a plan for implementing the Statewide Literacy Initiative. The plan must include a program of outreach activities and coordination with existing services, such as community-based organizations, VISTA recipients, and nonprofit literacy action organizations.

Funding for FY 1987 and FY 1988 ($6.9 million and $7.2 million, respectively) was made available to the states September 30, 1988. These funds were made available to states based on the estimate of the homeless population in the state made in the CHAPs. No state received less than $75,000. At this writing, $5 million has been appropriated for FY 1990.

In November 1989, $7.1 million was awarded to state education departments through a competitive process. Of the 42 applications received, 30 state education departments received grants. Funds for FY 1990 will be awarded through a competitive process in the spring of 1990.

In most states, the department of education contracted with adult basic education centers to provide the services. A spokesperson from the U.S. Department of Education emphasizes the need to provide a range of supportive services to the homeless in order to bring each person to a state of readiness to learn. Experienced shelter providers are the most knowledgeable about the needs of the homeless. Collaboration between shelter providers and adult basic education teachers is essential.

In Pennsylvania, the State Department of Education invited applications from 18 agencies that ran adult education or literacy programs and were located in areas with a high density of homeless people. Thirteen agencies responded, and 12 were funded—5 school districts, 2 community colleges, 2 literacy councils, 2 community-based organizations, and 1 community action agency. The thirteenth organization began a program but closed it because homeless participants were required to come to a traditional classroom setting and they simply did not attend. Organizations were encouraged to provide support services, such as day care and transportation, along with basic instruction. They were also encouraged to use peer coaches, if possible. Peer coaches are usually persons who are homeless for a prolonged period of time, are recruited to coach, and help to teach other homeless people. The hope is that the experience of teaching will help build self-esteem in the peer coach, and both the coach and the student will benefit. McKinney funding for these programs ends March 31, 1990. Five programs will continue with local funding. The Pennsylvania State Department of Education will apply for additional funding from the U.S. Department of Education to continue these 12 programs and to expand into another high-density homeless area previously not served.

The program designed by the Greater Pittsburgh Literacy Council was based on the idea that you cannot simply go in and teach homeless individuals to read and write. It is much better to teach these skills (along with listening and speaking skills) in relation to solving concrete problems they may encounter. Individuals work on concrete tasks such as simulating a phone call or a mock interview to improve their speaking skills. The program brings a large group of students together to identify their basic needs in broad terms (shelter, employment, and so forth). Individuals are pretested on reading and writing; an individual goal plan (both academic and vocational) is then developed. Students meet individually with teachers/vocational counselors as well as in groups for vocational field trips. Services are tailored to academic levels (e.g., students with reading levels from grades 0-8 are tutored twice weekly) and vocational interests and attainment.

The California Department of Education provided funding to seven shelters (three family shelters) for onsite adult basic education. Shelter providers supervise the programs and hire the staff. Two shelters are collaborating with adult basic education centers that send their teachers over to the shelters to provide instruction. The department withholds a portion of its grant funds each year for training, research, and evaluation of projects by an outside consultant; workshops; developing innovative curriculum; and purchasing computer software for its programs. Funds are also being used to build a statewide network.

An adult education consultant who oversees the programs states that innovative curricula and creative teachers are required to make a program successful. She believes that, to teach homeless students to read, it is necessary to use material that is interesting and useful to them. The curriculum focuses on substance abuse, building self-esteem by self-understanding, parenting, and family literacy. The family literacy curriculum provides materials adults can learn to read and then read with their children. Material is also provided for bilingual parents.

In FY 1987, for program year 1988-89, the Ohio Department of Education received $260,350 for this program. The Ohio Coalition for the Homeless and the Adult Basic Education Directors from around the state were enlisted to work with local coalitions for the homeless and Adult Basic Education Local Site Directors to help create a proposal for the state. Once a basic plan had been designed, it was evaluated by several parties with knowledge and interest in the homeless issue.

The plan provided that the Adult Basic Education Programs in the school districts in the most populated cities would receive funds on a formula basis. The programs in these cities designed and implemented their programs for the homeless in conjunction with local coalitions in those cities.

The Ohio programs emphasize instruction in the shelters and focus on preparation for the General Education Development (GED) test as well as basic skills instruction.

Education for Homeless Children and Youth

In an effort to halt the unfair practice of barring homeless children from public schools because they do not have a fixed address, this program prohibits such denials and provides money to state departments of education to ensure that homeless children have access to free and appropriate public education. The state must apply for the money and can receive a minimum of $50,000.

States are required to prepare and carry out a state plan, establish an office of coordinator, and gather data on the number of homeless children in the state, documenting the extent of the problem homeless children have in getting into public schools.

The state plan must propose concrete solutions for resolving disputes over who is responsible for educating homeless children. Too often, children are denied entrance to school once they lose their housing in their school district and are told to register in the district where the shelter is located. The plan must ensure that the child will be enrolled in whatever school district is in the best interest of the child, whether it is the child's former school district or the new one where the shelter is located. These children must receive the same services as other children. Also, states must ensure that the records of a homeless child who is transferred are provided to the new school in a timely manner.

Practically speaking, what are state education departments doing with these funds? Initial funding for this program was used to gather data on the extent of the problems homeless children face in gaining access to public education. State plans were submitted and reviewed in 1989. The actual implementation of the plans varies—some states have made more progress than others. States also vary in how they have used their funding to accomplish the goals in their plan. Generally, funds are not given to nonprofit organizations to provide services to homeless children, but rather to school districts for activities such as research, technical assistance, training, and other activities that facilitate the coordination of services.

Although this program will not be a source of funding for your program, you should be able to assist homeless families obtain the public education their children are entitled to receive. We encourage you to contact your state Department of Education to find out what is being done.

The Pennsylvania Department of Education established the Education of Homeless Children and Youth Program to identify and recommend policies, develop the state plan, supply information to the federal government, and work with all those involved in the school districts and local agencies serving homeless families and youth. Data were collected by several sources including shelter providers statewide to estimate the number of school-age children in the state who are homeless. A statewide task force of shelter providers, educators, and advocates was formed and assisted in creating the state plan. Public hearings were held in three major cities, and copies of the plan were made available to shelter providers, schools, other organizations who work with the homeless throughout the state, and to the general public. Many organizations sent written comments and suggestions on the plan to the Office of Education for Homeless Children and Youth.

Policy guidelines are issued throughout the state in a newsletter called the "Basic Education Circular." All of the Pennsylvania school districts have designated contact persons that shelters can call for assistance. To help the school districts, the state coordinating office has produced a directory of organizations (private nonprofit, government, and so forth) that provide services to homeless families and youth.

In an effort to develop models for local coordination of services for homeless children and followup services when children move, the Pennsylvania Department of Education awarded research grants to five school districts varying in size and setting (urban, suburban, and rural). The school districts were asked to look at informal arrangements between homeless families, shelters, and schools that resulted in effective coordination of services for homeless families.

The Pennsylvania coordinating office plans to continue to share this model throughout the state, emphasizing coordination between shelter providers and representatives from the school districts (at their regional conferences, 40 percent of the participants were from school districts, 40 percent from shelters, and 20 percent from the community). Onsite visits for inservice training will also be continued across the state.

Exemplary Grants Program for Homeless Children

The purpose of this program is to provide funding for "exemplary" programs that successfully address the needs of homeless children in school. At this writing, $2 million has been appropriated for FY 1990. State education departments and school districts can apply for funds.

The specific policies and procedures for this funding have not yet been developed. Information may be obtained from your state Department of Education or the U.S. Department of Education. (See appendix for the federal contact person.)

Emergency Community Services Homeless Grant Program

The purpose of this program is to provide emergency community services to the homeless. This grant program is flexible and conducive to creative utilization, with the potential for preventive services. Funds for this program are given to the states according to the Community Services Block Grant (CSGB) formula. The states then distribute the funds to Community Action Agencies (CAAs) or other community services block grantees around the state to provide emergency assistance to the homeless. States must make every effort to obligate funds to eligible agencies within 60 days of receiving them.

This program can be used to provide a wide range of services to the homeless such as transportation, food or clothing assistance, medical or dental care, or day care for homeless children. Up to 25 percent of program expenditures may also be used under certain conditions to assist those at risk of being homeless by helping with mortgage, rent, or utility payments.

In the first round of funding, FY 1987, $36.8 million was appropriated for this program nationwide; $21.9 million has been appropriated for FY 1990. Private nonprofit organizations serving homeless families may be able to access some of this funding from their local CAAs.

Ohio has approximately 52 CAAs. Although it is not required, each CAA conducts a needs assessment, often in the form of a public meeting, to determine the current needs of the community and how the agency can best serve these needs with the resources it has available. The plans of the CAA are published for review and comment by the public. In Ohio, the CAAs usually hold their planning sessions sometime in January for the coming year. A local grant recipient emphasized that the use of this funding is determined by the annual needs assessment. It seems critical to find out if, where, when, and how needs are determined in your area.

In FY 1987, Ohio received $1,462,836 to administer the Emergency Community Services Homeless Grant Program (EHP). The program was twofold in nature. In order to assure that the needs of the homeless were addressed statewide, funds were made available to the 52 CAAs on a formula grant basis, with $250,000 reserved for a competitive grant process.

These funds were used for a variety of activities, including the following:

- Contracting with emergency shelters to provide social services
- Creating new programs
- Supporting or expanding existing programs
- Hiring a coordinator to recruit and train volunteers in a shelter for homeless families
- Salary for a counselor in a shelter for battered women and their children
- Purchasing personal care items for the homeless at a community food bank

The Council for Economic Opportunities (the CAA in Cleveland) provides services to low-income people in five neighborhood centers. This organization used its McKinney grant for FY 1989 to contract with several private nonprofit organizations to provide services to the homeless for 1 year. These nonprofit groups received awards ranging from $6,000 to $24,000, depending on the need.

For further information on this program, contact your local Community Action Agency. If you are not familiar with the local agency, you can contact the state agency that administers this program for further information (see appendix).

Aid to Families With Dependent Children (AFDC): Transitional Housing Demonstrations

The purpose of this program is to develop strategies for more creative uses of AFDC funds for homeless families and to reduce the use of welfare hotels. The program will provide funding for two to three states for demonstration programs to develop transitional and permanent housing instead of the current practice of sheltering families in welfare hotels.

Successful grantees are expected to rehabilitate or construct transitional facilities that can be easily converted into permanent housing with onsite social services. A demonstration project must:

- **provide transitional housing to AFDC families residing in welfare hotels,**
- **permanently reduce the use of welfare hotels by developing an equal number of transitional units, and**
- **ensure that the cost of housing homeless families in transitional units is less than or equal to the cost of sheltering the families in the welfare hotel.**

This program will be administered by the U.S. Department of Health and Human Services, Family Support Administration. At this time, $20 million has been appropriated for FY 1990. Guidelines for this program will be available in the spring of 1990. (See appendix for the federal contact person for this program.) DHHS proposed rules regarding the use of emergency assistance or special needs funds under the AFDC program will not be effective before April 1991.

The Runaway and Homeless Youth Act

The Runaway and Homeless Youth Act was enacted in 1974 as Title III of the Juvenile Justice and Delinquency Prevention Act. In 1980, it was expanded to address the needs of homeless youth as well, and it was given a new name, the Runaway and Homeless Youth Act. Local communities attempting to address the needs of homeless youth have benefited greatly from this legislation—existing services have been expanded and new resources developed.

Funding is available to establish or support community-based centers that provide outreach, temporary shelter, drop-in centers, counseling, and aftercare services to runaway and homeless youth and their families.

Unlike many of the McKinney Act programs, dollars from this program go directly to community-based organizations. Private for-profit and nonprofit agencies and coordinated networks of youth-serving agencies are eligible and must apply directly to the federal Administration on Children, Youth, and Families (ACYF). Grants are competitive and are awarded for 3 years.

Funding is allocated among the 50 states, the 5 territories, the District of Columbia, and Puerto Rico according to their populations of persons under the age of 18. The minimum allotted to the states, the District of Columbia, and Puerto Rico is $75,000, and the minimum for the territories is $30,000.

In FY 1988, $21.4 million was awarded for these community-based center grants (commonly referred to as basic center grants) and $750,000 for coordinated networking grants that provide training and technical assistance to local grantees. Unfortunately for new programs, at times no funds have been available for new grants in certain states because the entire state allocation was awarded to existing grantees on a noncompetitive basis.

In FY 1988, 327 grants were awarded. Approximately 120 were new grants and the rest were continuing grants. The grants are awarded for 3 years; each year approximately one-third of the grantees finish the cycle and must compete for a new grant. The process for renewing a grant is highly competitive. In FY 1989, $14.2 million was allocated for noncompeting continuation grants to existing basic center grantees with 1 or 2 years remaining of their original grant, and $10 million was available for new grants.

Funding for this program has been authorized through 1992. A requirement of this grant which may keep programs from applying is that grantees must provide 10 percent matching funds. The good news is that the grantee match can include in-kind services, indirect costs (facility, equipment, services), or cash. Other requirements include the following:

- Location in an area frequented by or accessible to these youth
- No more than 20 youth in residence and adequate ratio of staff to youth
- Adequate plans for contacting relatives, assuring safe return of a child according to the child's best interest, contacting local officials, and providing alternative living arrangements
- Adequate plans for interagency cooperation
- Plans for aftercare counseling to youth and their families within the state and, when possible, in the state youths are returned to
- Procedures for keeping adequate statistical records
- Annual reports to the funding agency
- Ability to follow required accounting procedures and fiscal control devices
- Submission of a budget

A grant may not cover new construction or renovation costs exceeding 15 percent of the total. This may be waived in special circumstances based on demonstrated need.

The grant application must include a program narrative of not more than 25 pages. It must cover four topics:

1. Objectives and need for assistance
2. Results and benefits expected
3. Approach

4. Geographic location

Specific review criteria on which the narrative will be judged are included in the *Federal Register* announcement.

Applicants in most states must also submit information, usually a program summary, to their Single Point of Contact (SPOC) for "intergovernmental review." (This is required for most federal grants). A SPOC is a local government agency designated by the state to review applications and make recommendations in an effort to ensure that services are not being duplicated and that an agency's work fits in with overall local planning. This agency also solicits comments from other agencies about the applicant. Applicants should contact their designated SPOC as quickly as possible so that they can inform the agency of their prospective application and receive instructions on how to proceed. A list of SPOCs is provided in the *Federal Register* announcement.

The Michigan Network of Runaway and Youth Services comprises 30 organizations providing services to runaway and homeless youth. Since 1974, the Michigan Network has been involved in advocacy, networking, public awareness, technical assistance, and resource development.

Fourteen of the member organizations are federally funded through the Runaway and Homeless Youth Act. For the past several years, member agencies of the network have worked together to develop a state plan for distribution of federal funds. This has provided for a coordinated approach to the allocation and distribution of resources and services for runaway and homeless youth.

Transitional Living Grant Program

An amendment to the Juvenile Justice and Delinquency Prevention Act establishes transitional living grants for runaway and homeless youth. This program provides grants and technical assistance to nonprofit and public agencies to establish and operate transitional living and support services for youth between the ages of 16 and 21 for whom family reunification is not an option. The focus is on shelter and services (for a continuous period up to 540 days) that promote the transition to self-sufficient living.

Eligible activities include the development of, or strengthening of, projects that provide shelter for youth either directly within the program (such as group homes or shelters for up to 20 youth), in host family homes, or in supervised apartments. Individual plans must be developed for every youth describing their individual needs, including any referrals required to promote a successful transition to independent living. The program must establish an outreach component in order to include all eligible youth.

The program is required to submit an annual report outlining and describing the activities and achievements of the program, characteristics of youth served, numbers served, and accomplishments of the program.

Useful Federal Programs Not Targeted for the Homeless

Community Development Block Grants

A potential source of funding for homeless programs is the Community Development Block Grant (CDBG) Program. The purpose of the program is to distribute federal money to local governments to improve communities by providing decent housing and expanding economic opportunities principally for persons of low and moderate income. Approximately $2.5 billion to $3 billion is appropriated annually for the CBDG program.

Initially, CDBG funds are divided, with 70 percent going to the Entitlement Cities and Urban Counties program (which are larger urban population centers) and 30 percent to the state Community Development Block Grant Program. Then, the funding is allocated to the states and entitlement cities and counties based on a formula that considers several factors including population, age of housing, and economic distress. There are differences in how money is distributed through these programs. An important point to remember is that entitlement cities and counties may distribute their funds directly to nonprofit organizations (see appendix for a list of HUD regional offices and state CDBG Program managers).

Broad discretion is given to the states, counties, and cities on how to use their CDBG funds, but they are required to hold public hearings on the proposed use of funds so organizations and individuals can voice their opinions. Some advocates complain that CDBGs are so discretionary that they don't always target low and moderate income persons and have been used to "revitalize" neighborhoods, thereby displacing low-income people.

CDBG funds can be used for public services including the provision of social, health, and educational services. Some of the activities that can be funded by the CDBG program include:

- rehabilitation of residential and nonresidential structures;
- construction or improvement of public facilities such as shelters for the homeless, streets, and neighborhood centers; and
- conversion of schools for eligible purposes.

A 15-percent cap is placed on funds used for public services in a county or city as a whole. However, communities are allowed to maintain the same level of CDBG funds used for social services as in the past (prior to 1983), even if that level is higher than 15 percent.

In FY 1988, of the $2.3 billion in CDBG funds that went to the entitlement cities and counties, $45 million was spent on the homeless. Most of this funding was used for building or rehabilitating shelters or acquiring land for shelters. A portion of the funds was spent on food services, operating costs, and social services for the homeless.

The U.S. Conference of Mayors reports that of 20 cities surveyed in 1988, 18 were using CDBG funds for homeless projects. The city of Seattle uses about $4.9 million of its CDBG funds each year for public services. Homeless families and youth are given priority for these funds, and several shelters and housing programs for homeless families are receiving CDBG funds. Also, Seattle uses a portion of its funds to provide day care specifically for homeless children.

In Seattle, CDBG funds are combined with local funds, which have been increasing; this allows for some new projects to be supported each year. Existing programs have to reapply every year; however, if they have been doing a good job, they are given preference over new programs. This provides a stable source of funding for the homeless-family programs that have been able to access it.

The process of applying for CDBG funds in Seattle (as in most areas) begins with the development of a spending plan by the city Office of Management and Budget (OMB). Public hearings before the city council are then held on the plan. Once the city council has approved the plan, interested organizations are invited to submit proposals applying for funds. Proposals are evaluated and funding is allocated to the chosen organizations. Public hearings are again held, and the city council reviews the allocations and may change to some extent how the funding is allocated.

The regional office that administers this program in the state recommends that interested organizations do the following:

1. Assess the needs of your local community and document how your proposed project can address those needs.
2. Present a solid request.
3. Use advocacy groups to lobby the local government for your proposal.

The availability of CDBG funds for homeless family programs may vary from place to place. CDBG funds have often been used by homeless programs to fulfill the matching requirements of the McKinney Act programs. Nonprofit organizations interested in this funding should contact their local department of community development in entitlement communities or local officials in smaller cities. In addition, for nonentitlement areas, nonprofit organizations may wish to contact the state officials responsible for the program or the HUD field office (see appendix).

Social Services Block Grant (Title XX of the Social Security Act)

Since the Social Services Block Grant (SSBG) program is the largest source of federal funding for social services, one might assume that it is an instant source of funding for homeless family programs. However, funds from this program may be used for a wide range of social services, and homeless programs must compete against many different groups when seeking these funds.

Briefly, the SSBG program, federally administered by DHHS, gives grants to the states and territories; the amount is determined by the size of the population. These funds are available to the states and territories for use in funding a variety of social services. The states, however, have considerable discretion in determining exactly what services are provided and who is eligible. In the past, states had to comply with strict requirements for citizen input into the state plans. A few states have voluntarily continued their efforts to include citizen participation in their state plan. States are required to publish the plan (which includes the pre-expenditures report that they must submit to DHHS each year before using their SSBG allotments) but, unfortunately, they do not have to publish it in a daily newspaper. Citizens may comment on the plan, but the state is under no obligatation to respond to comments or to incorporate them into their plan.

SSBG funds are primarily used for the following:

- Child care
- Child protective services
- Home-based services for older persons
- Noninstitutional care for the disabled

Other services are also funded through this program, including the following:

- Employment education training
- Counseling services
- Prevention
- Adult day care
- Case management
- Substance abuse services

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States can disburse their block grant funds in a variety of ways. They might add them to other funds to form a "general fund" that can be used for a variety of programs. A state might divide its SSBG funds among its counties, which then add them to their general funds. State or county government agencies have the option to provide the services themselves or to contract with nonprofit organizations for services.

To find out how these funds are handled in your state, contact the appropriate county government agency in your area. This may be the Department of Human Services or Department of Social Services or a similar agency. If you are unable to obtain information, contact similar departments on the state level. Once you understand how your state distributes these funds, you will begin to understand where and when to lobby for these funds for homeless family programs.

In Ohio, for example, SSBG funds are distributed to three state departments; the Ohio Department of Human Services (ODHS) receives 72.5 percent. The ODHS withholds 4 percent for administrative costs and statewide training. The remaining funds are divided among the counties throughout the state. Each county is required to submit a 2-year plan describing how these funds will be used (e.g., what services will be provided and to whom). The state mandates that 20 percent of the block grant pay for child day care services. The other 80 percent may be used for a wide range of services. Each county is required to have a Social Services Advisory Board composed of citizens, representatives of other government agencies, and others. The advisory board reviews the current budget and the activities from the previous year. Some boards write the plan themselves, while others simply provide input to the department writing the plan. A schedule for public hearings must be included in each county's plan. The county plans are submitted to the state and consolidated into a state plan. After the public hearing, the plan is sent to both houses of the general assembly for approval.

How can an individual or group or organization make an impact on this process? According to a representative from the Ohio Department of Human Services, efforts should be concentrated at the county level. Interested persons should testify at the public hearings to educate policymakers about the need for services and program dollars for homeless families. Another suggestion is to lobby members of the county advisory board to get them to support your cause. Once a county plan reaches the state level, there is generally little discussion (the public hearing on the state plan usually lasts about 20 minutes in Ohio).

Alcohol, Drug Abuse, and Mental Health Services Block Grants

Through this program, the federal government provides funding for alcohol and other drug treatment and prevention services to the states. Because of the tremendous interest in drug-related problems in recent years, Congress enacted the Anti-Drug Abuse Act of 1986 and the Omnibus Anti-Drug Abuse Act of 1988, which significantly increased funding for this program.

Funding is distributed to the states in block grants, which means each state receives a certain percentage of the total amount available. A state's share is determined by a formula that considers several different factors. In 1986, the formula was changed to put more emphasis on the urban population in a state and, although the national funding available for this program increased, some states have actually had a decrease in their expenditure. (Table 2 shows the allocations for FY 1988.)

Funding for alcohol and drug treatment services, whether federal or state, is distributed by each state's alcohol and drug abuse agency. (The title of this agency may vary, e.g., Connecticut Alcohol and Drug Abuse Commission, Indiana Division of Addictive Services). To inquire about funding for the homeless in your state, you can contact your state Alcohol and Drug Abuse Program Director. A list of state and territorial program directors can be obtained by contacting the National Clearinghouse for Alcohol and Drug Information (see appendix).

Most states have a lead staff person within their alcohol and drug abuse agency who works specifically with the homeless. A first step would be to ask how much of the current funding is used for programs for the homeless. If very little or no funding is designated for the homeless, ask why. If funds are being used, are they being used in the best way possible? How are funding decisions made in your state?

States have broad power over how the block grant funding is used. While funding does not have to be used specifically for the homeless, funds can be and are being used for that purpose. In 1987, the National Association of State Alcohol and Drug Abuse Directors (NASADAD) published a study entitled "Innovative State Activities Relating to Alcohol and Drug Treatment Services for the Homeless Population." Forty-eight states were polled regarding programs for the homeless; specific information was gathered from 32 states. Three different types of activities were reported:

1. Programs specifically for the homeless
2. Statewide taskforces or planning initiatives for the homeless
3. Research studies of the homeless population

The states varied greatly in their activities. Some reported activity in all three areas, while others reported that nothing was being done in these areas, although a portion of the clients served in their generic drug programs are homeless. In some states, the homeless are just beginning to be considered in the state planning for alcohol and drug treatment services.

In Minnesota, for example, most of the public funds (federal and state) for addictions treatment are consolidated and used to subsidize the cost of treatment for anyone who needs it. Homeless people may be examined at a county facility. If the examination reveals that treatment is needed, the county makes the appropriate referral. If people are not enrolled in the Medicaid program, the state's consolidated fund will pay for the treatment while helping them get Medicaid. Then the state will seek reimbursement from Medicaid. If clients have private insurance that pays 70 percent of the cost and they cannot afford to the pay the remainder, the state's consolidated fund will supplement their payment. A portion of the Alcohol and Drug Abuse Block Grant funds is used for this consolidated fund.

Table 2. Alcohol and Drug Abuse Block Grant Allocations for FY 1988

Alabama	$ 5,679,658	Nebraska	$ 2,597,903
Alaska	2,245,900	Nevada	2,038,813
Arizona	5,191,678	New Hampshire	1,264,073
Arkansas	3,636,951	New Jersey	8,936,162
California	34,961,000	New Mexico	N/A
Colorado	4,866,043	New York	44,154,800
Connecticut	6,785,755	North Carolina	7,929,193
Delaware	1,387,285	North Dakota	1,069,173
Florida	20,966,923	Ohio	14,129,867
Georgia	6,599,822	Oklahoma	3,030,522
Guam	50,000	Oregon	5,058,083
Hawaii	2,111,746	Pennsylvania	15,575,217
Idaho	1,493,432	Puerto Rico	4,459,584
Illinois	15,817,000	Rhode Island	1,815,533
Indiana	3,614,095	South Carolina	3,486,509
Iowa	4,237,214	South Dakota	879,006
Kansas	2,582,561	Tennessee	4,287,392
Kentucky	5,172,666	Texas	17,130,335
Louisiana	8,131,299	Utah	2,763,304
Maine	2,076,382	Vermont	1,431,446
Maryland	7,128,087	Virgin Islands	377,483
Massachusetts	9,123,000	Virginia	6,437,879
Michigan	16,943,388	Washington	6,150,849
Minnesota	7,557,468	West Virginia	1,393,425
Mississippi	2,336,329	Wisconsin	7,389,154
Missouri	6,281,567	Wyoming	N/A
Montana	1,415,447	Washington, DC	2,847,030

Source: Butynski, W., and Canova, D. *State Resources and Services Related to Alcohol and Drug Abuse Problems, Fiscal Year 1988. An Analysis of the State Alcohol and Drug Abuse Profile Data.* Washington, DC: National Institute of Alcohol Abuse and Alcoholism and the National Institute on Drug Abuse.

The remaining block grant funds are used to support case management and housing initiatives. The state, through the Minnesota Chemical Dependency Program Division, has been providing grants to private nonprofit organizations to help pay for startup costs and a portion of ongoing operating costs for new facilities for chronic substance abusers (generally single individuals). These facilities typically offer board and lodging, Alcoholics Anonymous or Narcotics Anonymous meetings, and case management. Many of these residents would be homeless without this program.

Currently, only three facilities in Minnesota serve families (chemically dependent women with children). Startup funds for these projects came from local government or private sources, because federal funding is not available for construction of facilities. The director of the Chemical Dependency Program Division explains that this is why the state has so few of these facilities. Operating costs are covered by payments from the clients either through insurance (e.g., Medicaid, private) or the state's consolidated fund or a combination of both. These clients come primarily from the streets, or crack houses, or crash pads. Families can stay up to 8 months.

In 1989, the state, using its own nonfederal funds, issued a request for proposals to provide services to the homeless. Only very limited funds are available for these grants, however. Shelters or other nonprofit agencies are eligible to apply; expertise in the field of chemical dependency is required.

The New Jersey Division of Alcoholism and Drug Abuse funds some services aimed at homeless individuals with substance abuse problems. These include a group home in Atlantic City for alcoholics, the salaries of three alcohol counselors at the Salvation Army Shelter in Jersey City, a residential care center for long-term homeless alcoholics in Trenton, and several detoxification centers that the homeless can utilize. The Division also provides some financial support to the "Patterson Priests" in Patterson, which provide addictions counseling to any resident of four emergency shelters (one of which is for families) who has a substance abuse problem.

The New York Division of Substance Abuse Services (DSAS), which receives block grant funds, initiated Project Heart (Homeless Emergency Assistance Referral and Treatment), which provides outreach and services to shelters for individuals and families. The New York DSAS is currently trying to develop onsite services at transitional shelters for families.

Volunteer Programs — Action

Starting volunteer programs that involve business people, high school students, senior citizens, or others is a good idea for a nonprofit organization. A group of committed volunteers can provide invaluable support to an organization. A volunteer program can provide needed services for free and can also generate publicity, expand your mailing list, and broaden community support for your organization. Volunteers may also be willing to assist with fundraising, and volunteer assistance is essential for special fundraisers (e.g., auctions, dinners).

Action is the federal domestic volunteer agency whose stated purpose is to promote volunteerism in the United States. Established in 1971 as the center for federal volunteer programs, resources, and initiatives, Action comprises many different programs, including: Volunteers in Service to America (VISTA), the Foster Grandparents Program (FGP), the Retired Senior Volunteer Program (RSVP), the Student Community Service Program, the Senior Companion Program (SCP), and the Action Drug Alliance. More than 500,000 volunteers work in their communities through Action programs. In addition to volunteer programs, Action also provides grants, technical assistance, and information on volunteer programs and resources.

Setting up a successful volunteer program requires careful thought and planning. Action puts out a guide book, *Take Action Against Drug Abuse*, that outlines how to start a volunteer antidrug program in your community. This guide gives some basic principles on how to use volunteers effectively for any type of program. Contact the Action office nearest you to obtain a copy of this guide (see appendix) or request a copy from: Action Drug Alliance, Action, Washington, DC 20525.

VISTA

Often, nonprofit organizations find it difficult to secure funding to cover staff salaries. Through the VISTA Program, volunteers (18 years of age or older) give 1 year of service to an organization. (Volunteers may opt to stay a second year). These volunteers receive their salary and their medical insurance from VISTA. An organization may request one or more volunteers, depending on its need.

Currently, 90 programs serving the homeless around the country are using VISTA volunteers. For example, the Connecticut Coalition for the Homeless uses volunteers in a variety of ways, including assisting homeless families in finding permanent housing. Travelers Aid of Rhode Island uses VISTA volunteers to conduct training and resource development for runaway youth programs. The Salvation Army of Syracuse, NY, uses volunteers for resource development for a variety of programs for the homeless, including childcare, enrichment programs for children, and finding housing for homeless youth (runaway and troubled youth) and adults. Brunswick Area Council of Churches in Maine uses VISTA volunteers to recruit community volunteers to operate a homeless shelter and to develop a plan to address the problems of street youth. Volunteers of America of New York City has VISTA volunteers assisting the homeless in literacy, acquisition of permanent housing, and employment; it also recruits community volunteers.

Private nonprofit organizations and state or local public agencies are eligible to sponsor a volunteer. Interested organizations should contact their state Action office (usually in the state capital) and describe their project. The state office will supply an application and technical assistance (if needed) in completing the application. The VISTA program generally does not want volunteers used for one-on-one casework or other similar one-on-one activities. Volunteers are meant to be used for mobilizing community resources through activities such as recruiting volunteers, fundraising, developing programs such as childcare or employment, setting up or expanding programs, community outreach and public speaking, or looking for buildings needed for projects and helping to bring them up to code.

The competition for VISTA volunteers varies from state to state. However, "homelessness" and "low-income youth" are two of the areas to be targeted according to the federal law that governs the VISTA program. Also, it is VISTA's policy to try to address the needs of at-risk youth (homeless youth fall into this category). Many organizations that serve the homeless have greatly benefited from VISTA volunteers. Programs serving homeless families and youth should consider how they can utilize VISTA volunteers.

The Foster Grandparent Program

The Foster Grandparent Program recruits low-income persons 60 years of age or older to work one-on-one with children with special needs. Homeless children fall into this category, and programs for homeless families should consider submitting a proposal to have volunteer foster grandparents work with the homeless children they serve. Older volunteers can bring a wide array of skills and experience to an organization while giving themselves the satisfaction of remaining active and helping others. More than 250 of these programs are at work throughout the country.

Volunteer foster grandparents usually spend 2 hours a day with the two children assigned to them. These volunteers receive a small stipend per hour for their work plus medical insurance and a yearly physical and transportation and meal assistance if necessary. The FGP volunteers work with their children at "volunteer stations" that are set up at shelters for neglected children, Head Start programs, juvenile detention centers, schools, hospitals, state schools for the mentally retarded, drug abuse rehabilitation centers, and other organizations. For example, Foster Grandparents work at a county medical center in Fresno, CA. The center treats infants and young children from low-income migrant families, many of whom are neglected, abandoned, or abused. The Foster Grandparents supervise the children's play activities, escort them to medical treatment, and, in general, provide loving care and support.

The Retired Senior Volunteer Program (RSVP)

In recognition of the growing population of senior citizens in America, the federal government established RSVP in 1971. Men and women aged 60 and over who have retired are recruited as volunteers to provide needed community services.

RSVPs are run at the local level with local needs dictating the issues and problems addressed. RSVPs have focused on the needs of at-risk youth (including runaways or homeless), teenage pregnancy, drug abuse prevention, literacy, in-home care, consumer education, and crime prevention. They provide assistance to private nonprofit and public agencies. Programs for homeless families and children may be able to use RSVP volunteers in their community.

Currently, 750 projects can be found across the country, in all major cities and in many rural areas. In Louisville, KY, RSVP volunteers are working at a soup kitchen and food distribution center for the homeless. In Woodside, NY, RSVP volunteers work at a clothing distribution program for the homeless.

Agencies interested in setting up a volunteer station can contact their local RSVP program.

Student Community Service Program

The purpose of this program is to place high school and college student volunteers in community organizations (e.g., shelters, soup kitchens, and Head Start, juvenile diversion, literacy, and Big Brother/Sister programs) that serve low-income people. Grants to cover the cost of organizing and administering a volunteer program are awarded for 3 years.

A 1988 grantee, the Housing Partnership, Inc. (HPI), in Williamsburg, VA, targets low-income families without the economic resources to upgrade their deteriorating housing. In conjunction with citizen groups and local government agencies, HPI does volunteer home repair work to upgrade unsafe, substandard, low-income housing units that do not qualify for existing governmental housing programs. Student volunteers are recruited from local high schools and colleges, Boy and Girl Scouts, and 4-H Clubs. The project director works with HPI's board and the housing project coordinator to match volunteers with appropriate home repair projects. Home repairs are supervised by adult project managers, and the project director coordinates activities with high school vocational shop teachers.

A Notice of the Availability of Funds usually comes out in the *Federal Register* in the fall. Nonprofit organizations as well as universities, high schools, and government agencies can apply for funds. Organizations can request up to $15,000 for the first year, $10,000 for the second year, and up to $5,000 for the third year. All grantees are required to provide $3,000 in matching funds in all 3 years. In 1988, some 97 applications were received for new grants, and 35 grants were awarded, totaling approximately $1.3 million. The majority of projects funded were multifocused, which means they serve different populations or address several areas of need.

For example, the Youth Resource Center, Inc., in Hyattsville, MD, was originally funded for its student service-learning project in 1987. Currently, it is in its third year of funding. The project recruits college students to volunteer at two programs for homeless teenagers. About 15 students spend 15 hours a week with residents. In the past 2 years, about 50 college students have put in approximately 2,800 hours. Because this project has been so successful, the Youth Resource Center has fully integrated it into the overall planning and budget for the future when Action funds are no longer available.

For further information on this program, contact the Program Specialist for Student Community Service in your state's Action office (see appendix).

Program Demonstration and Development Division

The Program Demonstration and Development Division of Action offers several grant programs. Two of these, the Demonstration Grants Program and the Drug Alliance Program, have considerable funds, and programs serving homeless families or youth are eligible to apply. Funding announcements for these programs appear in the *Federal Register*. Organizations that believe they have a particularly innovative idea can contact the Program Demonstration and Development Office in Washington, DC, and ask for an application (see appendix). Unsolicited applications are considered, although very few grants are awarded this way.

Action's Drug Alliance Office provides grants to test model programs attempting to address the problem of drug use among youth, such as prevention strategies for youth, formation of low-income parent groups, and prevention activities in public housing. They have identified homeless children living alone or with their families on the streets, in shelters, or other temporary housing as at high risk for drug abuse. Currently, they are interested in proposals for creative volunteer programs that reach out to these children. The office disbursed $1.4 million to 29 grantees for FY 1989. The grants ranged from about $6,000 to $35,000.

The FY 1989 funding announcement asked for proposals for creative volunteer programs aimed at keeping youth drug free. Covenant House in Fort Lauderdale, FL, received a grant of $35,000 to add a component to an already existing volunteer program. Covenant House runs a residential treatment program called CHAMP that serves youth severely debilitated (but not physically addicted) by their alcohol/drug use. As part of the Action grant, graduates of CHAMP serve as volunteers for the new component, Primary Drug Prevention, which identifies at-risk youth who have not used drugs. In addition to peer volunteers, professional staff and adult volunteers work with the Primary Drug Prevention Program. Through peer counseling, rap sessions, and groups (facilitated by volunteers) on self-esteem, values, healthy lifestyles, and other topics, the program seeks to prevent these youth from using drugs. Action's Drug Alliance funding ended in February 1990 but Covenant House continues the Primary Drug Prevention Program with a grant from the U.S. Department of Health and Human Services. In addition to serving at-risk youth, the program serves youth who have experimented with drugs. Youth that need treatment are served by the CHAMP program.

In 1989, the Demonstration Grant Program awarded 12 grants totaling $900,000 to organizations that developed innovative volunteer programs serving low-income persons, particularly at-risk youth. The Demonstration Grant Program looked for projects that could recruit volunteers easily, had both private and public financial support, and were models that could be replicated elsewhere. The grants ranged from about $6,000 to $50,000. Programs are usually funded only once. Drug use prevention is a focus of this program, and about 40 percent of the funds go to projects related to this issue.

Central Nebraska Community Services in Loup City is a Community Action Agency that serves four rural counties. This organization received a demonstration grant of about $26,000 for a program that uses volunteers for outreach and education of parents to promote drug-free youth. The Neighborhood Prevention Network in New York City received a grant of almost $50,000 for Project Team: Parents-Youth Partnership, which matches an older volunteer youth with a family with young children who are experiencing problems (e.g., abuse) The youth volunteers are there to help the parents better cope with their problems.

Private Sources of Program Funds

Programs for the homeless can often raise substantial funds from the private sector. Sources include several different types of foundations—community, independent, and corporate or company sponsored; corporations and businesses; and religious organizations. Addresses of the foundations discussed below are given in the appendix.

Programs can also seek funds from individual donors through letters, public service announcements, and special fundraising events. Samples of successful fundraising strategies are included below.

Foundations

Foundations that give grants support certain areas of interest such as social service, education, or science. Funds provided by these foundations may be used in a variety of ways, including general support and seed money to start a new project or to acquire capital. The majority of foundations limit their support to nonprofit organizations with 501(c) (3) tax-exempt status. Foundations often restrict their grants to organizations within a certain geographic area.

Programs solicit funds from foundations through grant applications or proposals. It is imperative to thoroughly understand the procedures and goals of a foundation before submitting a proposal. Sources of such information include the Foundation Center, your local library, or your local United Way. The Foundation Center provides a variety of information on private sources of funding (foundations and corporations) and fundraising strategies and techniques. Of particular interest to homeless family programs is the Foundation

Center's computer printout, which lists foundations throughout the country categorized by the focus of projects they have recently supported.

The Center has 4 national offices and more than 170 cooperating collections located in all 50 states. Cooperating collections are libraries or other organizations that have copies of certain materials from the Foundation Center. The extent of the resources available at local cooperating collections may vary from place to place. (For further information on the Foundation Center, see the appendix.)

An important reference tool for information on foundations is the *Foundation Directory*, published by the Foundation Center. It provides an extensive list of the larger grantmaking foundations throughout the country, including their areas of interests, recent grantees, and contact person. This book and similar publications may be available at your local library, local United Way, and other large, nonprofit agencies. Universities, colleges, theatres, and other orga-nizations seek funding from foundations and may also have these publications.

Another source of information is a foundation's tax return, Form 990, which lists all the grants the foundation made that year. Tax returns may be available through the Foundation Center, or you can obtain a copy from the IRS or from the foundation itself.

If you are unable to obtain current information, you can contact a foundation directly and request a copy of the latest annual report and any other information that is available. Also, you can ask to meet with a representative from a foundation to discuss your program and its needs. A meeting may provide important information on what the foundation looks for in a proposal and how much funding you should request. Another suggestion is to contact current grantees and ask them about their experience in applying for a grant. Find out how long their proposals were, how detailed they were, what they included in their budgets, and any other pertinent information. Some organizations may even send you a copy of their winning proposal.

Several foundations are discussed in some detail below to provide the reader with a better idea of how they work and how programs can benefit from their concerns.

Community Foundations

Community foundations, such as the Boston Fund and The Chicago Community Trust, can be found in almost every state. Your local or state coalition for the homeless (or other nonprofit agencies in your area) may be able to direct you to your community foundation, or you can look in the *Foundation Directory*.

Generally, community foundations fund charitable organizations in the areas of education and social services. Decisions are made by the board of directors, which is composed of representatives from the community, and grants are given only to charitable organizations within the local community. These foundations do not have endowments. They receive their funds from many different contributors. Many of these foundations publish annual reports or guidelines. Another source of information is their tax returns, which are available to the public.

Community foundations are concerned with emerging community needs such as homelessness. Several foundations have funded projects for homeless families and youth. For example, in 1987 the Chicago Community Trust awarded a 2-year grant of $38,000 to a local nonprofit organization to pay the salary of an outreach worker for homeless youth. The priorities and the amount of funding available may vary depending upon the community where the foundation is located. It is worth your time to find out about the community foundation in your area.

The Gannett Foundation

The Gannett Foundation is a private foundation, independent of Gannett Company, Inc., but making local grants only in communities served by Gannett media properties and subsidiaries. A current list of these communities is provided in the appendix. The communities served may change periodically as properties (newspapers, etc.) are bought and sold.

The Gannett Foundation funds projects in five major areas:

- Local grants
- Community Priorities Program (CPP)
- Adult literacy
- Special opportunities
- Journalism education

Through the local grants (the largest category of funding) and the CPP, Gannett funds a broad range of programs designed to meet the needs of each community.

The local grants program is administered by Gannett chief executives living in the community. These executives receive a certain allocation of funds from the foundation to be distributed to organizations in their communities who are meeting current community needs, such as providing help for the homeless. Local grants are usually $5,000-$10,000. In 1981, the Community Priorities Program was developed as an outgrowth of the local grants program. The foundation wanted to provide larger amounts of funding so organizations could start new projects designed to address large-scale community problems.

In 1987, 87 proposals from 81 localities were submitted in the competition for funds, and CPP grants totaling $3.5 million were awarded to 30 different projects in 29 cities. Grants ranged from $25,000 to $150,000. Each community determines its own priorities in the CPP program. In 1987, one-third of the grants were given to nonprofit organizations that work with the homeless.

The process of awarding CPP grants can be described as a partnership between nonprofit organizations and the local Gannett organization. First, the Gannett executives who run the local grants program, in conjunction with local leaders, organizations, and citizens, conduct a "needs assessment" to identify the most pressing community needs. How this needs assessment is conducted may vary from community to community: a questionnaire published in the Gannett newspaper asking readers to rank the seriousness of several problems listed; a meeting of local leaders, organizations, citizens, and so forth, called to identify the most pressing community needs; or local Gannett executives working closely with a large nonprofit organization like the United Way that conducts the actual needs assessment. It should be noted that the needs assessment usually produces a list of broadly stated problems such as homelessness or child care, not specific needs.

The needs assessment process determines how organizations are chosen to compete for the CPP grant. If a poll was conducted in the newspaper, a request for proposals (RFP) from interested organizations is published in the newspaper. If a meeting of local community leaders and nonprofit organizations is called, an organization interested in providing a service may be chosen or may simply emerge from that meeting. A large nonprofit organization, for example, the United Way, might ask interested organizations to submit proposals, or it may simply identify an organization known for its work in a particular area.

The organizations chosen to compete for CPP grants usually work closely with a team of people from the local Gannett organization. Gannett employees may assist in developing and writing the proposal. One successful grantee reported that the staff of the nonprofit organization wrote the proposal, and then the Gannett staff rewrote it, changing only the style, not content, to one with more of a newspaper flair. Another successful grantee said that the Gannett Foundation likes proposals with "flavor and personality" from grassroots organizations. The Gannett team takes part in the grant-seeking process and promotes the project at the national level.

The CPP grants are for 1 year, and the foundation has the option to renew a grant for a larger, smaller, or similar amount for a second year. With such short-term funding, organizations have to begin seeking future funding very quickly. The director of an organization that received a grant to start a program emphasized that the organizers didn't want to create a program and then not be able to keep it going. Thus, the Gannett grant funds are being used to support ongoing work; for instance, a photocopier (among other things) was purchased and staff training was paid for with the grant funds. Funds for general operating costs continue to come from other sources.

The local Gannett office can provide information on the current community priorities and how to submit a request for a local grant. When applying for funds through the CPP program, the first step is to ask how a needs assessment is conducted in your community. You may also want to find out what organizations in your area have recently applied for a CPP grant; then you can contact that organization for further information.

Some of the organizations that received funding in 1987 are listed below:

- Cabell-Huntington Coalition for the Homeless, Hungtington, VA, received $149,000 to provide medical, referral, and other social services to 3,000 homeless people at a new drop-in center and health clinic. (The major emphasis was controlling the spread of AIDS and other contagious diseases among the homeless.)
- Mary House, Washington, DC, received $55,000 for renovation of a model shelter providing low-cost transitional housing and other services to Hispanic women and their children.
- The Oasis Center in Nashville, TN, received $76,000 to set up Project Safe Place, a network of stores and other visible places in the community where homeless and troubled youth are assisted by trained volunteers.

- The United Way of Northern Nevada and the Sierra, Reno, NV, received $121,000 to set up a needs assessment and referral center, a revolving loan fund, and a transportation network to help recently homeless people find affordable housing, pay rent and other bills, find jobs, and become self-sufficient. (This grant was used as matching funds for a SAFAH grant under the McKinney Act.)

The 1987 Annual Report described CPP grant recipients as "not just providing temporary shelter" but "trying to help homeless people become self-sufficient, or to consolidate and coordinate services for the homeless." A large grant was given to a project in Los Angeles to create a comprehensive network that would adequately supply 114 shelters with funding and goods each year.

The Public Welfare Foundation

The Public Welfare Foundation was established in 1947 with assets from three newspapers owned by Charles E. Marsh of Ohio. The goal of the foundation is to promote human welfare by giving funds, with a minimal amount of red tape, to people whose need is genuine and urgent. The foundation emphasizes that it seeks to enable people to help themselves in a manner that destroys neither dignity nor initiative.

The Public Welfare Foundation provides funds to direct-service organizations that serve low-income or seriously disadvantaged people. Funding is provided in three general areas: health, education, and community support. The foundation has also targeted five categories as priority areas: the environment, population (e.g, family planning, teen pregnancy prevention), criminal justice, disadvantaged youth, and the elderly. Specific criteria have been established for funding under each of these categories. The foundation will give seed money for new projects as well as grants to expand or to replicate existing programs. The foundation awarded more than $12 million in 1989 to various organizations in the United States and abroad. The average grant was $36,000.

When applying to the Public Welfare Foundation, several important factors must be kept in mind:

1. *Long-term funding plan*: An applicant must identify a specific, short-term need on which the grant will have an effect and present a viable plan for continuation of the program after the grant is over. Emergency needs may be considered, but a long-term funding plan must be presented.

2. *Community support*: A program will be more attractive to the foundation if it has broad community support. This can be shown by local grants or contributions received, in-kind support such as volunteers, donations of equipment or supplies, and so forth.

In general, the foundation does not give money for buildings, conferences, capital expenses (i.e., land or equipment acquisition), religious efforts (i.e., organizations that only serve those of a certain religion or use a program to recruit members), endowments, foreign study, graduate work, individuals (this does not mean salaries), publications, research projects, scholarships, seminars, and workshops. However, flexibility in responding to needs on a project by project basis is emphasized.

In recent years, the Public Welfare Foundation has consistently funded projects for the homeless. The foundation awarded 18 grants in 1989 to programs for the homeless that provide shelter and other services such as health care, advocacy, job counseling, and mental health services. The foundation awarded many other grants for projects that serve low-income people, which may have been utilized by homeless families.

Following are some of the projects that have received funding in the past:

- An organization that provides health care to children in welfare hotels in New York City, for an outreach component to provide employment and training
- A Health Care for the Homeless Project in Washington, DC, that offers treatment, counseling, and referrals to homeless families in cases of child abuse and neglect
- A women's shelter in Shreveport, LA
- A homeless empowerment and learning program in Portland, OR
- Startup funds for transitional housing in Baltimore, MD
- A legal action center in New York City
- An agency that assists families with health care problems related to eviction or substandard housing in Jamaica Plains, MA
- A 24-hour shelter with a substance abuse program in Lebanon, NH
- The state coalition for the homeless to coordinate homeless services in Colorado
- A job readiness program in Nashville, TN
- An emergency shelter in Port Angeles, WA, that provides comprehensive counseling
- A resource center in Portland, OR, that assists people in finding housing
- Startup funds for a homeless outreach program

Tips from 1988 grantees:

- Catch the attention of the foundation in your initial letter. One organization that did not know very much about the foundation simply wrote a letter outlining their proposed project and the foundation responded.
- Show adequate community support for your project. The foundation looks closely at the other sources of funding you will secure once their funding is no longer available
- The foundation is willing to take risks and will give startup funds for new and untested projects. One organization's new job readiness program received support from the foundation.
- Include in-kind donations such as volunteer hours when you present your budget.

The foundation emphasizes that it is interested in projects that provide direct services to people whose need is urgent. Requests for grants may be submitted at any time. You can obtain a copy of the brochure that outlines the current policies, procedures, and guidelines by contacting the foundation directly (see appendix).

The Better Homes Foundation

The Better Homes Foundation is a nonprofit organization established in February 1988 by *Better Homes and Gardens* magazine. Since October 1988, the magazine has published several articles on homeless families in an attempt to educate readers and to ask for their support. The foundation's goal is to support the development of comprehensive programs for homeless families that address their long-term needs. Special emphasis is placed on homeless families and children at great risk because of substance abuse, family violence, or mental illness. Priority is also given to the needs of homeless children. The foundation believes that while housing is a critical part of the solution to homelessness, most families need more than housing. It is necessary to develop support services and programs that will help families through their transition into stable housing.

The next grants will be awarded in the spring of 1990. The foundation does not have an endowment. The availability of funds for grants depends upon contributions from individuals, corporations, and foundations.

In June 1989, the foundation asked for proposals that addressed the educational and psychosocial needs of homeless children 5 years old and under. Nine grants ranging from $7,500 to $20,000 were awarded to a variety of programs in different parts of the country:

- Two agencies in Westchester County, NY, which run cottage motels for homeless families, received grants to provide assessment and referral to the 85 children who reside at the motels.
- Support was given to a shelter in Houston, TX, that houses children who are homeless because of family problems and tries to reunite them with their families.
- A transitional housing project in Pittsburgh, CA, was awarded a grant for a half-time staff person who tries to ensure continuity of services for families when they move from transitional to permanent housing.
- A counseling program in Pontiac, MI, received funds for a staff person to visit families in their homes in an effort to provide continuing services once they are no longer homeless.
- In Los Angeles, a transitional housing project obtained a grant for a parenting skills program.
- A Washington, DC, program that provides extended transitional housing received funds for the resident children to participate in the local Head Start program.
- A health clinic in Birmingham, AL, was able to add a staff person who will help families connect with the educational resources available.
- A daycare center in San Francisco was given a grant for a developmental and therapeutic program for preschoolers.

The foundation is also in the process of developing a technical assistance package that will contain resource information and comprehensive training materials for service providers and homeless parents.

The Robert Wood Johnson Foundation

The Robert Wood Johnson (RWJ) Foundation, in conjunction with the Pew Charitable Trust, committed approximately $25 million for Health Care for the Homeless Demonstration Programs in 19 cities across the country. The initial funding for these programs was awarded in 1985. The foundation has an ongoing interest in health care for the homeless and homeless families. For information and updates on RWJ programs, write or call the foundation directly.

The Homeless Families Program is a new national initiative of the Robert Wood Johnson Foundation and the U.S. Department of Housing and Urban Development. Under this competitive program, HUD Section 8 certificates and 2-year foundation grants will be made available to eight of the Nation's largest cities. Deadline for applications was January 22, 1990.

Corporations and Businesses

Corporations and businesses are other potential sources of funding for programs that serve homeless families or youth. Many corporations have their own foundation or designated office to handle requests. Like other grantmaking foundations, many corporate foundations print written guidelines for proposals, and some also publish annual reports. *The Corporate 500, The Directory of Corporate Philanthropy*, and the *Taft Corporate Giving Directory* describe who to contact, funding priorities, and recent grantees of the major corporate foundations and charitable giving programs. Many corporate-sponsored foundations are also listed in the *Foundation Directory*, which provides information on larger grantmaking foundations throughout the country. These books are available at the Foundation Center or may be found locally at libraries, universities, or large nonprofit organizations.

Some large corporations operate their foundations at corporate headquarters and limit funding to projects in the community, city, or state where the headquarters are located. Programs should identify different corporations with operating facilities in their area and contact them to find out if funding is available and how to apply for it. It is always wise to investigate a corporate foundation or giving program before requesting funding. Your request for funds should follow any guidelines provided by the corporation. (Information on corporate foundations that are potential sources of funding for homeless family programs can be found in the appendix.)

Large corporations and companies may also provide funds by matching employee contributions. For every dollar an employee donates, the business donates 1, 2, 3, or more dollars. Businesses may also provide in-kind contributions of materials or services. Programs serving the homeless have received donations of computers, bed linens, blankets, office and household furnishings, and other materials. The services of repair persons, construction workers, and accountants, lawyers, doctors, and other professionals have also been donated. One shelter provider asks any business or organization they purchase services from to donate at least a portion of the service. Another shelter provider asks businesses and individuals to furnish, rehabilitate, or decorate a certain room. Then a plaque is placed in the room in honor of the donor. According to this shelter provider, "people respond better when their contribution goes for something tangible."

Religious Institutions

Competition is intense for funds from the major religious institutions, and grants for direct service programs for the homeless are small, around $5,000. The larger grants provided by some religious organizations tend to go for housing development.

A sample of religious funding programs is given here. A more complete guide to church-related funding (including those groups that give grants of less than $5,000) can be obtained through the Women's Technical Assistance Center in Washington, DC (addresses in appendix).

The Lutheran Church

Both Lutheran and non-Lutheran projects for the homeless have received funding from the Division of Social Ministry Organizations of the Evangelical Lutheran Church in America (ELCA). Non-Lutheran applicants should involve Lutheran partners through coalitions, volunteers, or board memberships whenever possible, and Lutheran organizations must have the support of their local synod.

The division receives approximately $1.2 million from the ELCA World Hunger Program to distribute to organizations that meet certain broad criteria and that provide shelter, job training, health care, or child care. The emphasis is on services for poor women and children, especially new and creative approaches to service delivery.

In 1990, grants will be awarded in the late spring; the cutoff date for applications was January 10, 1990. Many more applications are received than can be funded. The grants range from $2,500 to $7,500. In 1988, a nonprofit organization in Kansas City, MO, received seed money to open a drop-in center for the homeless. The center can be used as a mailing address for homeless individuals and families, and services such as job referrals are provided.

Homelessness is an emerging priority for the Lutheran Church's Missouri Synod (LCMS) World Relief Fund. Most of its grants are given to programs that are organized, sponsored by, or otherwise connected to a Lutheran congregation. Approximately $700,000 was available for U.S. grants in 1988, but $3.5 million was requested. Grants are awarded in April, September, and January; applications should be submitted 2 to 3 months in advance.

In 1988, several small grants ($1,000 to $7,000) were given to homeless projects, and one large grant ($25,000) was given to a nonprofit organization in

New York City to develop housing. The average grant is $7,000. One 1988 grant was used to provide outreach to homeless children and their fathers. Absent fathers are located, and counseling and assistance is provided to try to reunite the child and father.

The Episcopal Church

The Coalition for Human Needs of the Episcopal Church funds projects throughout the United States that help poor people meet their basic needs, such as food and shelter, or further their own development; advocate for social change; or encourage congregations and community groups to pool their resources to develop and implement programs. Projects for the homeless have received funding from this program, although the criteria for funding do not specify homelessness as a priority. Applications for funding may be submitted by Episcopal as well as non-Episcopal organizations.

Funds may be used for general support of ongoing programs, including staff salaries, and for some areas of housing development. Grants are awarded for 1 year only.

The coalition has approximately $890,000 to distribute annually. Grants range from $7,000 to $10,000. Deadlines for submitting applications for the two funding cycles are early February and early July. About 275 applications are received per cycle, and about 95 are funded.

The United Thank Offering (UTO) was founded by women in 1889 and continues to be administered by women. UTO provides funds to programs that are addressing compelling human problems such as homelessness, hunger, disability, single parenthood, severity of aging, and others. UTO has recently funded several programs that serve the homeless.

Proposals must come through the the local Episcopal diocese with the approval of the Bishop. All applicants must show some connection with the Episcopal church (e.g., financial support from a local Episcopal church). Each diocese establishes its own specific priorities, and each diocese can submit two requests for funding to UTO each year. UTO funds cannot be used for capital fund campaigns, continuation of operating budgets, debts already incurred, direct assistance to individuals (food, rent, utilities, medicines), or salaries, although authorized positions essential to a proposal will be considered.

UTO provides funds on a one-time basis. It has approximately $2 million available annually, and grants range from $8,000 to $25,000. Grants are awarded once a year, generally in July or August. UTO suggests that organizations providing services to the homeless make their projects known to their local Episcopal church. Programs may attract church members to help in providing services as well as in generating local and national funding. Interested nonprofit organizations should approach their local diocese in October or November, when applications are first made available to the bishops.

The Presbyterian Church

Last year, the Presbyterian church allocated several hundred thousand dollars specifically for the homeless through their Community Development

Approach to Homelessness and Housing program. This funding is available to groups or organizations developing housing or organizing the homeless. Shelters or transitional housing programs may be considered for funding if they work to empower homeless people through activities such as job training.

The Presbyterian Hunger Program (PHP) responds to issues of domestic and international hunger on behalf of the Presbyterian Church (USA). PHP funding is provided for direct relief as well as for projects that address the social and economic causes of hunger. Funding categories include education and interpretation of hunger issues, direct food relief, developmental assistance, and influencing public policy and lifestyle integrity. Programs serving the homeless whose proposals fit into these categories are welcome to apply, whether the applicant group is Presbyterian or not.

Many of the grants given in 1988 went to food banks and hunger networks or coalitions. However, grants were also given to projects providing job development or other related employment services to the poor.

Applications are reviewed by the Presbytery and Synod (the church's governing bodies on the local and regional levels) where the project is located. Nonprofit organizations interested in applying for funds are encouraged to contact the appropriate church bodies. If you are uncertain about whom to contact, call the PHP directly for information.

U.S. grants awarded in 1988 ranged from $1,000 to $14,0000, with most grants in the $3,000 to $5,000 range. The total funding available is about $3 million.

The PHP has two funding cycles each year. Applications are reviewed by a committee in the fall and spring; deadlines for the receipt of proposals are usually set 2 months ahead of the committee meetings.

Jewish Fund for Justice

The Jewish Fund for Justice is a national grantmaking institution through which the American Jewish community supports efforts to combat the causes of poverty in the United States. Funds are awarded on a nonsectarian basis. Nonprofit organizations do not have to have any religious affiliation to apply for funds. Grants are given to projects throughout the country that combat poverty and systemic disenfranchisement. Examples of advocacy and organizing activities supported include, but are not limited to, low-income housing, access to health care, public education, community economic development, and the barriers confronting women in poverty. Funds, however, are only given to programs that provide an advocacy or empowerment component as well as services. For example, an educational program for the homeless to help them become advocates on their own behalf would fit the guidelines.

Most grants are for $5,000. Proposals may be submitted any time. Grants are awarded in March and October. Approximately 175-200 proposals are received per cycle, and about 1 in 10 is funded.

Volunteer Programs

Several religious organizations recruit volunteers to serve 1 year at an agency that provides services to poor people. Programs that use these volunteers are expected to provide them with a modest living allowance, a small stipend, and medical insurance. The volunteers usually live in community with other volunteers and strive to understand the connection between their faith and their work. Volunteers from these religious programs currently serve in religious as well as non-religion-based organizations.

These volunteers, many of whom are just out of college, may or may not have experience in working with the poor, and they require training and supervision. However, a volunteer can be an excellent solution for an agency that needs help but cannot afford to hire a staff person at the market rate. Usually, these volunteers are highly capable individuals looking to be challenged through meaningful positions. Several religious volunteer programs are listed in the appendix.

Individual Donors

Donations from individuals represent the majority of nongovernmental funding to charitable organizations. Nonprofit organizations use a variety of techniques for tapping this source. Direct mail campaigns and special fundraising events are the most popular. Publicity about your organization, in the form of press releases, TV and radio spots, and newsletters, will help build up public awareness of your services and give your organization greater credibility. One very successful fundraiser who operates a shelter in California stated that the press is the most important element in raising money. He tries to get publicity for any of the events his organization runs. "Getting your organization's name out" can help you raise more money whatever method you use.

Direct Mail Campaigns

Many nonprofit organizations seek contributions from prospective donors through the mail, either by personal letters or a regular newsletter (quarterly at most). This method requires a great deal of work and the cost of postage. Professional consultants are available to assist in developing successful campaigns. One homeless service provider hires a consultant at $65 an hour to help with its mailings. Another group writes the letter and sends it to an organization that reproduces the letter, addresses the envelopes, and does the mailing to any area in the country they specify. This organization contends that this method is cost effective because it eliminates all the staff time that would normally go into a mailing.

You can contact other nonprofit organizations in your area to find local fundraising consultants. Before hiring consultants, it is wise to check out their reputation. These consultants can be expensive, and you want to be sure you get your money's worth.

If you cannot afford to hire a consultant or have someone else do a mailing for you, and if you have no experience in direct mail fundraising, written advice is available. Publications on how to run a successful direct mail campaign are available through the Foundation Center. Materials may also be found at your local library.

One of the first steps is to start a list of potential donors. If you already have one, regularly add to the list. Your staff or Board of Directors can provide names of prospective donors. Other organizations may be willing to swap donor lists with you. (Be sure this is all right with the donors on your list.) One nonprofit group suggests acquiring a voter list. Some organizations sell lists, and it may be worthwhile to purchase one. One service provider purchased a list of all the people who bought houses in a particular area in the past year. If someone gives a donation (e.g., clothing) to your organization and you give them a receipt, add their address to your list. Try to acquire names for your list whenever you can.

In their letter requesting contributions, most organizations use actual stories about the people they serve. Be sure to include information about your organization so the reader has a clear picture of your clients and services. Consider the recipient of the letter when deciding on whose signature to use. If a certain group of people is familiar with one of your board members, that person should sign it. One homeless provider convinced a well-known clergyman to sign an appeal for funds.

One homeless provider, who is experienced in direct mail operations, offered some additional advice. "A letter is no good unless it is opened!" Many people do not open letters that look like "junk mail." Therefore, place letters in large monarch envelopes with handwritten addresses (by volunteers), use a real stamp on each envelope, and do not put a stamp on the return envelope (this is not cost effective).

Correlating your mailing to a holiday or a special event or person may also be helpful. Many organizations send out their mailings around Thanksgiving and Christmas since more attention is usually given to charities at this time. One provider was successful by lighting a "poverty tree" before Christmas. A notable person from the community "christened" the tree and asked people to donate; a press conference was held to attract media coverage. Donors were asked to put up paper money with their name on it and then send the real money in later. Through the organization's newsletter, readers were asked to donate to the poverty tree. This event attracts new donors each year for the organization.

Fundraising Events

Special events can raise money, publicize your program, and also be fun! However, they often require a great deal of work and time. Compare the amount of work required to the amount of money you expect to raise to determine whether your organization should conduct this event. If your goal is to generate publicity or support for your organization and fundraising is secondary, estimate how much publicity you can generate. Successful events require careful planning and a lot of volunteer time.

The easiest way to hold a special event is to enlist some other group to organize and sponsor the event on your behalf. One homeless provider in California had the trial lawyers association in the area put on a dinner. The tickets for the dinner were expensive, and a great deal of money was raised. University students or high school students may be willing to hold special events for organizations. Many colleges sponsor swim-a-thons and walk-a-thons, and donate the proceeds to charity.

If no other organization will hold an event for you, you can still do it yourself and have some fun in the process. Be original and dare to be different—you might get some publicity and raise some money.

Whatever event you run, certain things should be remembered:

1. The event has to be fun!
2. Identify potential donors of large amounts of money.
3. Consider carefully how to approach donors—who or what will generate a positive response?
4. Put one person in charge of the overall operation.
5. Set up a coordinating committee and recruit volunteers to help with the event.
6. Work hard to raise funds before the event actually happens.
7. Publicize the event as much as possible.
8. Make sure your idea is acceptable to everyone in your community. For example, some people might find a dumpsterathon or pig rental inappropriate.

In looking for ideas for special events, see what other programs are doing. Several successful fundraising events are described below.

Dumpsterathon

A homeless provider in Florida had volunteers telephone people and ask them to pledge money for the amount of time that the volunteers would sit in dumpsters.

Wrestle-a-thon

A homeless provider in Minnesota invited a group of professional wrestlers to hold this event. Tickets for the event raised money.

Hot Air Balloon Ride

A Michigan runaway shelter held this event. It generated more publicity than funding.

Home Court

This event is run by a legal clinic for the homeless in Washington, DC, and it has been very successful in raising a large amount of money each year. Georgetown University Law School professors play basketball against members of Congress. Tickets cost $5 for students and $10 for adults. A VIP reception for the players, friends of the clinic, and others is held after the event and costs $50 to attend. The clinic's board of directors assists with the event along with a coordinating committee made up of people who work for Congress, Georgetown University, and local businesses and many volunteers. This event was originally organized by a law student who was volunteering at the legal clinic.

Prior to the game, law firms throughout the city are contacted by letter and asked to donate to the event The letter outlines what the legal clinic does for the homeless and is signed by members of the board of directors, many of whom are lawyers. It is very important to have someone with name recognition sign the letters. The letters are followed up with a phone call by someone from the clinic asking if a donation will be made. In addition, volunteers ask area organizations to donate food and beverages for the VIP reception. At half-time, an auction is held. Businesses have donated items including everything from art work, to an autographed basketball, to an exotic vacation for two.

Members of Congress and the Georgetown Law School faculty are recruited by volunteers, and their names are used to help promote the event. The actual game is great fun—it raised $40,000 the first year and $60,000 the second year.

Obviously, other communities do not have Congress in their backyard. However, prominent or well-known persons in your community (local government officials, university faculty, radio station disc jockeys, local TV personalities) may be willing to participate in a similar event. It doesn't have to be basketball; use whatever sport is popular in your area—baseball, track, soccer, and so forth. You could set up an obstacle course, or series of events, and hold a sort of "celebrity olympics."

Prospective donors don't have to be limited to law firms. Approach accounting firms, insurance agencies, businesses, and so forth. Use whatever contacts you have in the community.

The Chocolate Fantasy

A shelter for families in North Dakota runs this event each year with great success. First, the staff and volunteers contact local candy stores and other places that might have chocolate to donate. Volunteers are asked to make, bake, or create something with chocolate. All the chocolate donations are brought to the shelter, and the public is invited to attend for a small fee. Gourmet coffees are also served. Two sessions are held, one in the afternoon and one at night.

Women of the Year Awards

Each year, a North Dakota organization solicits nominations from the community for outstanding women in 10 different categories (contribution to children, sports, women of tomorrow (young women), and so forth). Tickets are sold for the awards dinner where all the nominees are honored, and a winner from each category is chosen. This event has raised money and a lot of publicity for the organization.

The Wishing Well

At least two homeless providers in the Midwest use this method to raise money. People can drop change into a well that clearly shows what program or charity the donation will go. This provides a few hundred dollars each month to the organization. One provider put a well, which was donated by a corporation, in a local store next to the checkout counter.

Pig Rentals

A shelter for battered women in Oklahoma ran this event. Volunteers contacted people from the organization's mailing list to tell them they had won a pig for the day. If the person contacted agreed to pledge money, then they did not have to take the pig. If they didn't pledge money, they were informed that they would have to babysit for a pig for one day.

Stock-a-rama

An affluent group in Arizona ran this event a few years ago. Participants bought play money to invest in the stock market for a month. Forty volunteer stockbrokers monitored each person's transactions. The person who made the most money got a prize, and the person who lost the most got his money back. All the money collected to buy the play money was profit!

Sorghum Stir Off

A rural group in Kentucky planted 4 acres of sorghum cane. They harvested it and refined it into 60 gallons of molasses, which they sold. The proceeds benefited their charity.

Celebrity Fashion Show

A homeless family service provider in California ran a celebrity fashion show for several years raising several thousand dollars each year. Local elected officials, outstanding community members, and media personalities, both male and female, modeled clothing provided by local merchants. Food was donated and a radio personality served as the master of ceremonies. A business women's club sold the tickets for the event.

Other Ideas

Many familiar events have proved successful for nonprofit organizations. Here are some suggestions.

Telethons
Bikeathons
Danceathons
Teas
Luncheons
Costume Parties
Haunted Houses
Clothing Sales
Antique Sales
Boat Races
Swimathons
Bowlathons
Dinners
Pig Roasts
Cocktail Parties
Charity Balls
Auctions
Carnivals
Ice Cream Sales
Walkathons
Triathalons
Picnics
Breakfasts
Concerts
Big Band Dances
Bazaars
Rummage Sales
Car Races

Federal Programs That Provide Benefits and Services to Homeless Families

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Many homeless persons are not receiving benefits for which they are eligible. In the past, homeless persons had difficulty being accepted for many of these programs because they were required to provide a permanent address. To help ensure that homeless individuals receive their benefits, Congress enacted the Homeless Eligibility Clarification Act (Title XI P.L. 99-570) as part of the Anti-Drug Abuse Act of 1986. This act requires the following:

1. Removing barriers to food stamp eligibility for shelter residents and permitting the homeless to use food stamps to buy prepared meals from soup kitchens and shelters.
2. Requiring the Family Support Administration, the Social Security Administration, and the Health Care Financing Administration (HCFA) to develop methods for verifying the eligibility of, and making Aid to Families with Dependent Children, Supplemental Security Income (SSI), and Medicaid, respectively, available to persons who do not reside in permanent dwellings or have no fixed home or mailing address. It is not known how many homeless persons are eligible for these assistance programs or how many homeless persons receive Medicaid.
3. Prohibiting the denial of veteran's benefits because of lack of a mailing address.

4. Requiring the Social Security Administration to make regular visits to homeless facilities to take SSI and food-stamp applications, and requiring SSA and the Agriculture Department to develop procedures to take SSI and food-stamp applications from people about to be discharged from medical, penal, and other institutions.
5. Explicitly making the homeless eligible for state and local job training programs authorized by the Job Training Partnership Act (JTPA), and requiring that their job training be coordinated with education, training, and assistance available under other public programs.

Despite this and other legislation that specifically states that homeless people should not be excluded from these programs, homeless families still encounter difficulty in obtaining these federal benefits. Those assisting homeless families should learn about these programs and current initiatives to help the homeless gain access to these benefits. Following are brief descriptions of some of the programs that serve low-income populations in general and/or target homeless individuals.

Aid to Families with Dependent Children (AFDC)

Administered by the Department of Health and Human Services, this program allows the states to make payments directly to eligible needy families with dependent children to cover the cost of food, shelter, clothing, and other necessary items. The program covers single-parent families with children under the age of 18 whose father or mother has died or is continuously absent from the home as well as two-parent families in which one of the parents is incapacitated. States may opt to continue AFDC to an 18-year-old child who is still in school and expects to graduate by the age of 19. In addition, 26 states include two-parent families in which the principal breadwinner is unemployed (AFDC-UP). As of October 1, 1990, all states must extend their AFDC-UP programs, although states may impose some stringent work requirements in connection with AFDC-UP.

The AFDC Emergency Assistance (EA) Program is an optional program in which 27 states and the District of Columbia currently participate. The federal government provides 50 percent matching funds to the states for this program. EA was created to provide temporary financial assistance and supportive services to families facing emergencies, which includes the risk of becoming homeless. AFDC-EA funds may be used for a variety of needs including emergency shelter, storage or replacement of household goods, moving expenses, payment of security deposits, or 1 month's rent. The states develop specific policies (who is eligible, what type of assistance they can receive, who provides the assistance) for their own EA programs within the federal guidelines. Nonprofit organizations may be able to use some of these funds to provide temporary shelter or other assistance to homeless families.

Understanding your state's AFDC plan will help you better assist the homeless families you serve. It may also be a source of funding. Information may be obtained at the local office that determines AFDC eligibility or your state department of human services.

Supplemental Security Income (SSI)

SSI provides direct monthly cash payments to eligible persons who are age 65 or older, blind, or disabled (for 1 year or more) with income and resources below a certain level. Eligibility is redetermined on a regular basis.

Social Security

Also known as Old Age, Survivors, and Disability Insurance, this program provides direct monthly cash payments to eligible recipients, including certain disabled and retired workers and dependents of deceased workers. Benefits to dependents of either deceased, disabled, or retired workers is based on the wage record of the worker.

Veteran's Benefits

Veteran's benefits include compensation for armed services-connected disabilities, pensions for low-income veterans over 65 or those who have disabilities unrelated to their military service, medical care, education, training, rehabilitation benefits, dependents' indemnity and death compensation for dependents of veterans who died of service-connected injury or illness, burial allowances, and death pensions for low-income dependents.

Food Stamps

This program provides low-income households with coupons to buy food from stores that accept the food stamp coupons. Persons who are homeless are eligible for expedited services and are entitled to receipt of food stamps within 5 days of applying.

Women, Infants, and Children (WIC) Program

The WIC program provide vouchers for nutritional food supplements to low-income, at-risk, pregnant women, infants, and children. The Hunger Prevention Act of 1988 (P.L. 100-435) states that eligible persons cannot be excluded from the WIC program because they are homeless and requires states to have a plan to serve the eligible homeless.

Medicare

Medicare provides comprehensive health insurance protection, in the form of hospital and medical insurance, to the aged, disabled, and those suffering from chronic kidney disease.

The Job Training Partnership Act (JTPA)

JTPA programs are administered by the Employment and Training Administration of the Department of Labor. These programs provide job training and employment services to economically disadvantaged adults and youth, dislocated workers, and others who have serious problems in finding jobs. Although JTPA does not specifically target the homeless, funds are used in some areas to provide job training to homeless individuals. No estimates are available on how many homeless people are served through JTPA programs.

State and local governments develop their own JTPA programs and are responsible for the managing and administering them. The governor of each state has several responsibilities: approve local plans, monitor program compliance, form the State Job Training Coordinating Councils (SJTCCs) that serve as the advisory councils for the implementation of JTPA programs in the states, and designate Service Delivery Areas (SDAs)—local governments serving a population of 200,000 or more or other areas designated by the governor; these SDAs receive the federal job training funds.

Elected officials in the SDAs appoint Private Industry Council (PIC) members. PICs must be formed according to the JTPA to plan the job training and employment services programs in their SDA. The chairperson of a PIC must be a representative of business, and a majority of the members must be from business or industry. Other members may be from community-based organizations, educational agencies, and other organizations. The PICs were established to directly involve private sector businesses and industry, in particular, in job training programs. Most of the JTPA programs are operated by local and state governments and the private sector.

Medicaid—Title XIX of the Social Security Act

Health care is critical for families; however, it is often difficult for poor people to obtain. Medicaid is a joint federal-state program that pays the medical bills of eligible, low-income persons and families. Nonprofit organizations can help homeless families by learning about the Medicaid program and then assisting the homeless in applying for Medicaid and ensuring that they receive all the benefits to which they are entitled.

Medicaid is not a single, unified program. The federal government provides the funds and specifies the basic requirements for operating the Medicaid program, as well as both mandatory and optional services and eligibility requirements. The states and the territories, however, design and administer their own programs, determining the persons covered, services offered, amount of payment for such services, and who can provide these services. It is important for homeless family service providers to be familiar with their particular state's Medicaid program.

In each state, a "single state agency" administers and oversees the Medicaid program. One of the best ways to gain a better understanding of your state's program is to contact a worker in the local or state Medicaid office who is willing to talk with you about the program. An ongoing working relationship with someone from the Medicaid office can be invaluable in learning about the program and assisting your clients. An agency may want to invite a Medicaid representative to staff meetings to familiarize them with the needs of their clients and how they can be better served. You may even want to ask someone from the Medicaid office to sit on the board of directors of your agency or on an advisory committee or other less official body.

Advocates working to change their state's Medicaid program may need to carefully review the actual state plan, which serves as a contract between the state and the federal government (through the Health Care Financing Administration). A state Medicaid Plan is a very specific, complex, and complicated document that describes all aspects of a state's Medicaid program—some have been known to fill most of a file drawer. Advocates also require knowledge of the process by which the state plan is reviewed and amended in their particular state and approved by HCFA. This information can be obtained by contacting the state's Medicaid office or the regional office of HCFA.

Medicaid Eligibility

The federal government specifies general guidelines and minimum requirements regarding eligibility for the Medicaid program that each state must follow. Within these general guidelines, the states design their own programs. Knowledge of these guidelines may help you to better assist the homeless families you serve in obtaining the medical care.

In helping someone get Medicaid, remember that no length of residency is required for Medicaid in any state. However, since a person on Medicaid receives a new eligibility card each month, a homeless person must designate a point of pickup for the card. This can be a shelter or nonprofit organization.

The following information summarizes the federal guidelines as they relate to homeless families.

Mandatory Categories of Eligibility

Homeless persons who fit into the following categories, termed "categorically needy," must be covered by all state Medicaid programs.

1. *Recipients of cash assistance such as AFDC, SSI, foster care, and adoption assistance.* This category includes all mothers and children receiving cash assistance under AFDC. States can, and some do, limit Medicaid coverage of SSI recipients by requiring them to meet more restrictive eligibility standards.
2. *Children under 1 year of age and pregnant women who meet the income and resource standards of AFDC, whether or not they receive AFDC.* The child is automatically eligible for 60 days and subsequently eligible for

1 year after birth as long as the mother remains eligible and the child remains in the household.

Each state determines specific caps or maximum levels of income and resources (e.g., savings, bank accounts, real property, inheritances) according to number of persons in a household. The income eligibility standards are usually below the federal poverty level, i.e., the cash income for different household sizes necessary for the individual or family to live adequately. The federal poverty level for a household of three in 1989 was $10,030 per year.

Effective April 1, 1990, states must cover all pregnant women and infants (under age 1) with incomes below 133 percent of the federal poverty level and have the option to cover up to 185 percent. Most states have waived the resource test for pregnant women.

3. Effective April 1, 1990, *all children under age 6 in families with incomes below 133 percent of the federal poverty line that meet the income and resource standards of AFDC but who do not qualify as dependent children*. It does not matter if the family is actually receiving AFDC. For example, a two-parent family in which the principal breadwinner is employed but the family meets the income and resource standards for AFDC would be eligible.

4. *Workers with disabilities, including individuals with disabilities who received SSI but have now returned to work*. This provision is designed as an incentive for severely disabled persons who work despite their impairments. Provided certain conditions are met, a person who loses SSI benefits because of earnings may still be eligible for Medicaid.

5. *Additional categories of elderly, blind, and disabled individuals* (e.g., elderly persons with disabilities.)

Optional Categories of Eligibility

Homeless persons who fit into the following categories may be eligible for Medicaid depending upon the particular state plan.

1. *"Ribicoff Children." Individuals under age 18, 19, 20, or 21 (as determined by the state) whose income and resources would make them eligible for AFDC but who do not qualify as dependent children.* States are required to cover all children under age 7 who meet the income and resource standards for AFDC but do not qualify as dependent children. The Ribicoff category allows states to expand their coverage to older children or to what is termed "reasonable categories of children" such as those in foster homes, subsidized adoptions, psychiatric institutions, or intermediate care facilities. This is an important category because it allows homeless youth (e.g., runaways, emancipated teenagers) who are not residing with their families to receive Medicaid if they are financially eligible.

2. *All or specified groups of children up to age 8 born after September 30, 1983, in families with incomes below 100 percent of the federal poverty level.* This provision enables states to be reimbursed for Medicaid services for young children whose family income is below the federal

poverty level but above the AFDC eligibility level. Thiry-nine states have adopted this category of eligibility. Sixteen states do not provide coverage for children after their seventh birthday whose family income is below the state AFDC guidelines.

3. *Pregnant women and infants with income up to 185 percent of the federal poverty level.* For example, if the federal poverty level for a household of three is $10,030, a pregnant women in a three-person household would be eligible for Medicaid with an income up to $18,500 per year. As of September 1989, 15 states were fully using this eligibility category, and an additional 7 states set the maximum income between 120 and 150 percent of the federal poverty level.

4. *Individuals who would be eligible for AFDC if coverage under the state's AFDC plan were as broad as allowed under the federal guidelines.* AFDC cash payments are given to families with children where one parent is incapacitated, dead, or absent from the home continuously. States can also provide AFDC to families with children when the principal breadwinner is unemployed (AFDC-UP). States can provide Medicaid to these families even if they do not have an AFDC-UP program. As of 1988, 30 states and the District of Columbia provided AFDC and Medicaid or just Medicaid to these families. The Family Support Act requires coverage of all AFDC-UP families beginning April 1990; then it becomes a mandatory category.

5. *Medically needy persons.* Medically needy applies to persons who are aged, blind, or have a disability; families with dependent children; pregnant women; and certain children, who can pay their basic living expenses but cannot afford to pay their medical bills. Because their income and resources are too high to qualify for AFDC or SSI assistance, they would normally be ineligible for Medicaid. States can decide to cover all medically needy persons or just persons in certain groups. If they select this option, however, all states must at least cover the following groups:

   - All pregnant women and children up to age 18, 19, 20, or 21, as determined by the state
   - The disabled or elderly or both
   - Small groups with special needs and circumstances—the state Medicaid office can provide information on these groups

6. *Individuals who would be eligible for but are not receiving cash assistance under AFDC or SSI*, including persons who have not applied

7. *Children under certain adoption assistance agreements.*

8. *Individuals who would be eligible for cash assistance under AFDC or SSI if they were not in an institution.*

9. *Individuals who would be eligible for AFDC if child care costs were paid from earnings.* This refers to persons whose work-related child care costs are paid by a state agency.

10. *Individuals who would be eligible if they were not enrolled in a Health Maintenance Organization (HMO).*

11. *Individuals receiving home and community-based services who would otherwise require institutional care.* (This falls under a waiver category which can be difficult to acquire.)
12. *Disabled children living at home who, because of SSI rules, would be eligible for Medicaid only in an institution (Katie Beckett provision).* When a child is institutionalized, the parents' total income is not considered in determining eligibility for SSI. In most states, SSI eligibility automatically means Medicaid eligibility. Once the child leaves the institution, the parents total income is again considered. Therefore, to remain eligible for Medicaid, children may be forced to stay in an institution when their needs could be met at home. The case of Katie Beckett, a ventilator-dependent child, brought this issue to public attention and resulted in this provision.
13. *Terminally ill individuals receiving hospice care who would be eligible for Medicaid if they were in an institution.* This applies only in states where hospice services are covered by the Medicaid program.

Medicaid Benefits

Medicaid benefits in all states must include the following:

- Inpatient and outpatient hospital services, including physician services
- Laboratory services
- X-ray services
- Certified nurse midwife services
- Transportation to receive medical care
- Early and periodic screening, diagnosis, and treatment (EPSDT)for those under 21 (discussed below)
- Rural health clinic services
- Skilled nursing facility (SNF) services for those over age 21
- Home health services for those entitled to SNF care
- Family planning services and supplies

States may elect to cover many optional services in part of their state Medicaid plan. The optional categories include the following:

- Clinic services
- Dental services
- Speech, hearing, and language disorder services
- Preventive services
- Rehabilitative services
- Personal care services
- Inpatient psychiatric services for individuals under age 21
- Intermediate care facilities for the mentally retarded
- Other health professional services

- Targeted case management services

States have broad power in determining the nature of a service and, within reasonable limits, the amount, duration, and scope of each mandatory as well as optional service. For example, a state can limit its coverage to 10 inpatient days per year or limit physical therapy services to 20 visits following each injury or medical episode.

In talking about Medicaid benefits, two concepts are widely discussed: comparability and statewideness. Comparability means that services (mandatory or optional) must be given in the same amount, duration, and scope to all those who are eligible. Statewideness means that if a service is offered in one part of the state, it must be available throughout the state. There are exceptions, however. For example, EPSDT is an exception to comparability in that states can offer enhanced benefits to children up to 21. Targeted case management is an exception to both comparability and statewideness in that the states can designate only certain groups of persons (e.g., pregnant and parenting teens) as eligible, and states may also restrict this benefit to persons in certain geographic areas of the state.

Early and Periodic Screening, Diagnosis, and Treatment Services (EPSDT)

The EPSDT program was created as part of the Medicaid Program in 1967 because it was generally accepted that preventive health care for children is cost-effective. This program requires states to provide early and periodic screening, diagnosis, and treatment services to all Medicaid-eligible children under age 21 to identify physical or mental problems and to provide treatment to correct or ameliorate any defects or chronic conditions discovered. This program also requires the states to inform all eligible persons of the availability of EPSDT services and to assist them in securing screening and treatment. Data collected by HCFA indicate that only 25-30 percent of the eligible children receive services through the EPSDT program. In general, states have not taken advantage of the possibilities for expanded screening or outreach services offered under the EPSDT program.

Although the EPSDT program exists in every state, it may operate under different titles. Names given to the program include Medicheck, Child Health and Disability Program, Project Good Health, and Child/Teen Health Program.

Eligibility

All children who are eligible for Medicaid are eligible for this mandatory program, including homeless children. They are a population at risk for developmental delays, and emotional, behavioral, and learning difficulties. Families on Medicaid often receive limited information about the value of the preventive health care services provided under the EPSDT program. Homeless advocates and shelter providers should explain this program to families and encourage them to participate.

Services Provided Under EPSDT

1. A detailed and comprehensive health examination that includes the following:
    - A health and developmental history
    - An unclothed physical examination
    - Mental health and developmental evaluation
    - Assessment of growth and nutritional status
    - Appropriate vision and hearing testing
    - Appropriate lab tests
    - Appropriate immunizations
2. Dental health care including:
    - Screening by direct referral to a dentist for children 3 years old and older
    - Dental care, at as early an age as necessary, for relief of pain and infection, restoration of teeth, and maintenance of dental health
3. Diagnostic and medical treatment of conditions disclosed during the screening process including the following:
    - All services included in the state's general Medicaid plan
    - Dental services as described above
    - Diagnosis and treatment of defects in vision and hearing
    - Immunizations not provided at the time of the screen

Effective April 1, 1990, states must reimburse for any optional Medicaid service allowable under the federal Medicaid program, even if these services are not made available to Medicaid-eligible adults. For example, EPSDT must pay for individual or group psychotherapy or other counseling services for children with emotional disturbances or behavioral disorders even if these services are not offered to adult Medicaid recipients. States are required to list in their state plans these and any other "discretionary services" to be provided to children participating in the EPSDT program.

Frequency of Services Under EPSDT

States are required to develop periodicity schedules that specifically state the number of screening visits children should obtain at various ages. These schedules must meet reasonable standards of medical and dental practice. They should include a neonatal examination and indicate the number screenings covered for children up to 21. The American Academy of Pediatrics recommends 20 routine visits between birth and age 21. However, the number of screenings per child varies from state to state.

Effective April 1990, EPSDT treatment services require that when a condition is discovered by an EPSDT screening, states must reimburse all related treatment services allowed under federal Medicaid law, whether or not these services are offered to other Medicaid beneficiaries under the state Medicaid plan.

EPSDT screening requires states to provide to all Medicaid-eligible children both interperiodic and partial screenings that are determined to be medically necessary by a qualified professional.

EPSDT Service Providers

Each state is required to provide or arrange for the care and services mandated under this program. The EPSDT coordinator in each state is expected to develop enough interagency agreements with public health, mental health, and educational agencies and institutions to ensure the availability of sufficient numbers of screening, diagnostic, and treatment providers.

In some states, formal contracts are signed between the state Medicaid agency and individual (e.g., physician) or group providers (e.g., hospitals, clinics) who are willing to provide EPSDT services. In some states, any provider who is eligible for Medicaid reimbursement can provide EPSDT services. Many communities have a shortage of Medicaid providers to care for children eligible for EPSDT services.

In some communities, providers that HCFA defines as "continuous care" providers agree to accept responsibility for a Medicaid-eligible child's health care needs. They must make available all screening, diagnosis, treatment, and referrals required by the program (except dental services, which may be arranged); maintain a consolidated health history including information from other providers; and provide other physician services as needed by a child for acute, episodic, or chronic illnesses and conditions.

Enrollment

- Children are enrolled by their parents or guardians who apply for the services; they must be determined eligible for Medicaid.
- When parents or guardians apply for Medicaid, they should be informed orally and through written materials by the Medicaid worker about the EPSDT program. Using clear and nontechnical language, information should be provided about the following:
    - The benefits of preventive health care
    - The services available under EPSDT and where and how to obtain those services
    - The provision of services under EPSDT without cost to those eligible under the age of 18, 20, or 21, as determined by the state
    - The availability of transportation and scheduling assistance upon request
- The Medicaid worker should ask parents or guardians if they would like their children to participate in the EPSDT program.
    - If the parent or guardian says yes, the Medicaid worker should supply the name and address of several EPSDT providers and offer to help the parent or guardian set up an appointment for the child.
    - If a parent or guardian says no to the EPSDT program when first informed, this does not exclude the child from the program in the future. At any time, the parent or guardian of a child on Medicaid can ask that the child participate in the EPSDT program.
- A child can enter the EPSDT system by simply going to an EPSDT provider, either knowingly or unknowingly, and receiving an EPSDT exam.

- With the first visit to the physician or clinic, the child is considered enrolled in the program and the required schedule of periodic appointments should be given to the parent. The EPSDT program must inform the family when the next periodic examination is due and offer to assist the family in obtaining EPSDT services.
- If a medical problem is found, further diagnosis or treatment must be provided. If the examining doctors cannot provide the care, it is their responsibility to make an appropriate referral to a Medicaid-participating provider. The EPSDT program can also help the family obtain treatment services.
- Persistence may be required in attempting to enroll a child in the EPSDT program. Getting all the right information and locating the appropriate EPSDT providers may be somewhat confusing at first. However, once you understand the system in your area, you can help many children get all of the medical care they deserve.

Outreach

States are required to develop outreach programs to identify and contact children and families who may be eligible for EPSDT services. Many states rely on county welfare eligibility offices to provide information on this program. Others contract with nonprofit providers such as Health Care for the Homeless clinics, Head Start programs, or other community-based nonprofit organizations to provide outreach services to ensure that children enrolled in the EPSDT program participate in screening and receive appropriate treatment.

Several states, however, have begun to develop new outreach strategies. Wisconsin, for example, uses a computer-assisted outreach program as part of its Health Check (EPSDT) Program. The state agency reviews the claims history on a monthly basis and identifies, in order of priority, children who have received no care at all, those who receive only episodic emergency care, teens without any preventive care, and children who have received no dental care. The state Medicaid program contracts with local public health departments and a few nonprofit health care providers to provide Health Check outreach. The lists of children who are receiving little or no care are compiled by the state agency and sent to the outreach workers each month. These workers are free to use whatever means available to find the children, secure a primary care provider, and get the children the needed screening and treatment services. For each child who is screened, the outreach provider receives $25. The Wisconsin screening entails a family interview and a parental concerns questionnaire that often result in needed mental health referrals.

The South Carolina Health and Human Services Finance Commission (the regulatory agency for the state's Medicaid program) employs nurses who make home visits to children whose parents have declined the EPSDT program for them or who are in the EPSDT program but have missed appointments. The visiting nurse does a health assessment on all the family members who are present when she comes and makes any necessary referrals to a doctor. The nurse also does nutritional assessments and some education on preventive health care.

The worker at the local department of social services who provides case management services to children in the EPSDT program can make referrals to the outreach nurses. It is not known if children from homeless shelters are being referred, but children in shelters are probably not on Medicaid. The shelter system in South Carolina tends to be for short-term use, with most of the shelters allowing people to stay less than a month. There is not much time to assist residents in getting entitlement benefits such as Medicaid.

Georgia and Colorado use a model similar to that of South Carolina in which local health department workers provide outreach services. Colorado also contracts with local Head Start programs for EPSDT outreach and case management.

Case Management

This provision, added to the Social Security Act in 1985 by Congress, authorizes states to provide case management services to assist eligible individuals in obtaining needed medical, social, educational, and other services. The development of the case management option reflects the growing awareness that Medicaid's health care mission cannot be effectively carried out without the support of nonmedical services.

The states can target case management services to high-risk populations and specific geographic areas. The states are required to define their case management services, target groups, geographic areas where service will be provided, and the educational and professional qualifications of the providers. Also, to be covered, these targeted case management services must not be part of any other service reimbursable by Medicaid. Excluding the chronically mentally ill and the developmentally delayed, clients have the right to choose their case management provider. The full potential of Medicaid's case management option in providing comprehensive services has not yet been realized.

The State of Washington has developed a case management program that targets Medicaid-eligible pregnant and parenting teens. The case management services are provided by the staff of a University of Washington project for homeless pregnant teens. The university's involvement began with a presentation on the university's program for homeless and runaway youth given to the Bureau of Parent and Child Health, the state agency that administers the targeted case management programs. Although the agency already had four other organizations running programs that target pregnant teens (a defined target group in the state's Medicaid Plan), the bureau was impressed by the presentation and asked the university program to provide the case management through Medicaid.

Despite the commitment of the state agency, many problems have arisen in getting reimbursement from Medicaid, and although this effort was started nearly a year ago, no funds have been received. One problem is the university's lack of experience with Medicaid. Another is the university's bureaucracy facing the state Medicaid bureaucracy. Community-based organizations without such a complicated bureaucracy could probably deal with the Medicaid bureaucracy and be reimbursed more easily.

Ohio and Missouri have developed case management programs that target at-risk pregnant women. Both programs have developed risk assessment criteria that consider medical (e.g., hypertension, previous miscarriage) and nonmedical factors (e.g., first visit to the doctor after the 14th week of pregnancy, limited education) in determining who is at risk. The Ohio program also considers domestic violence as a factor. Although homelessness does not necessarily place a pregnant woman at risk, representatives from these programs report that some homeless pregnant women probably receive case management services. The services are provided by Medicaid-certified providers, usually community health centers. At least one Missouri case management provider is a community health center that has a Health Care for the Homeless Program funded through the McKinney Act.

Vermont and Wisconsin have both developed case management programs that target high-risk children. The Vermont program targets children who meet a specific definition of the term "seriously emotionally disturbed." Wisconsin's program serves Medicaid-eligible children who are physically or developmentally disabled, alcohol or drug dependent, or seriously emotionally disturbed, as well as recipients of the EPSDT services. These examples emphasize that many homeless children are likely to fit into the target high-risk populations eligible for these case management services that could benefit the child as well as the entire family.

It is important to learn if programs such as these exist in your state so you can help children and their families access these services. Further, if no such program exists in your state, you may want to advocate for the development of similar programs that would specifically consider homeless children or adults.

Rehabilitative Services

In the past, state Medicaid programs basically covered physical rehabilitation under this category. The rehabilitative services option can be used for "any medical or remedial service recommended for maximum reduction of physical or mental disability and restoration of a recipient to his best possible functional level." More recently, use of this definition allows coverage for certain psychosocial rehabilitative services and assistance. Rehabilitative services can be provided by licensed practitioners (e.g., psychologists, social workers) at any site, including the client's home. States are looking at this definition as a way to cover a wide array of psychosocial rehabilitation services provided by a variety of community-based organizations.

Florida, for example, finances its mental health, substance abuse, and alcohol treatment services under the Medicaid rehabilitative services provision. A treatment plan including diagnosis, treatment objectives, and description of services is developed. Services include initial medical examination; individual, group, and family therapy; social rehabilitation; and day treatment. Children and adults are eligible for these services. The Alcohol, Drug Abuse, and Mental Health Program office in the state Department of Health and Rehabilitative Services contracts for these services with approved mental health providers, including drug, alcohol, and substance abuse centers and comprehensive community mental health centers.

Head Start

In the early 1960s, educators grappled with the problem of low-income children starting school with disadvantages, such as lack of health care and lack of confidence, directly related to poverty. In 1964, the federal government asked a panel of child development experts to design a program to help disadvantaged preschoolers. The panel's report became the outline for Project Head Start. What began as an 8-week summer program has developed into an 8-month program serving 452,000 preschool children and their families across the country. While no statistics are available on how many homeless children are enrolled in Head Start programs, these children and their families are likely to be eligible and could certainly benefit from this program. Eligibility guidelines are based on the federal poverty income standards.

This program is regulated by the Administration for Children, Youth, and Families (ACYF) of the Department of Health and Human Services (DHHS). DHHS regional offices award grants to community-based nonprofit organizations and government agencies including school systems to run Head Start programs in their communities. There are currently 3,000 grantees.

Appropriations for the program have increased steadily since it began, growing to $250 million in the past year. Generally, this funding is used to expand existing programs, not to start programs. Expansion is desperately needed, since many of these programs have long waiting lists. If you do not have a Head Start program in your area, funding may be available to start one. Contact your DHHS regional office.

The Head Start program offers low-income children aged 3 to school entry a comprehensive program designed to meet their emotional, social, health, nutritional, and psychological needs. The programs provide or arrange for the following:

- Education
  - Programs designed to meet each child's individual needs
  - High staff-to-child ratio
  - Staff members trained in early childhood education and child development
  - Educational activities that build self-confidence
  - Bilingual teachers to teach bilingual children
- Health
  - Medical, dental, and nutritional services
  - Complete medical and dental exams for all children
  - Followup treatment when necessary
- Nutrition
  - One hot meal and one snack planned every day by a trained nutritionist
  - Education and assistance to parents on how to prepare well-balanced meals and how to obtain food stamps

- Mental health
  - Mental health professionals available to all programs to train and educate staff and parents
- Social services
  - After families identify their needs, staff to assist in referrals and information on available community resources
  - Enrollment in emergency assistance or other social service programs
- Parent involvement
  - Classes and workshops on child development
  - Home visits by staff
  - Parents plan and run activities for their children.
  - Parents serve as teachers aides, story tellers, and so forth.
  - Parents serve on formal policy councils and committees that focus on administration and management of the program.
  - Parents have first opportunity to apply for entry level positions.

In 1972, Congress mandated that at least 10 percent of the national enrollment of Head Start be handicapped children. Currently, the 10-percent mandate is applied on a state-by-state basis. Handicapped preschoolers receive the same services as other children. In addition, staff works closely with other community agencies to ensure that the special needs of a handicapped child are met. Handicapped children may be eligible even if their family income is above the federal poverty standards.

Head Start programs vary in their settings and also the way the required services are provided. Programs may be home based, center based, or both. Local grantees should consider the specific needs of the children in their community and how those needs can be met most effectively considering the available community resources and the capabilities of the local staff. The development of different program options is encouraged.

Parent and Child Centers (PCCs) were developed in 1967 to provide comprehensive services to low-income families with children aged 0-3 years. There are currently only 34 around the country. These centers focus on improving a child's overall developmental progress using preventive measures such as increasing parenting skills through education, teaching parents to focus on their child's particular needs, and strengthening the family unit. The PCCs provide services similar to the regular Head Start programs. For information on these programs, contact your DHHS regional office.

Annotated Bibliography

Federal Register. Washington, DC: Superintendent of Documents, U.S. Government Printing Office.

A daily publication that announces new sources of funding through the Federal Government. Federal agencies publish their "Notice of the Availability of Funds" in the *Federal Register* describing program guidelines, where to mail requests for applications, deadlines for proposals, sources of additional information, and criteria on which proposals will be evaluated. To obtain a subscription, contact: Superintendent of Documents, U.S. Government Printing Office, Washington, DC 20402. Subscriptions: $340 per year or $170 for 6 months.

The Grassroots Fundraising Book: How to Raise Money in Your Community. Joan Flanagan for the Youth Project. Chicago: Contemporary Books, Inc., 1982.

This book contains numerous ideas for special events to raise funds and includes step-by-step guidance on how to run both elaborate, large-scale events and simple, small fundraisers. It is available at the Foundation Center and most public libraries.

Lives in the Balance: Establishing Programs for the Homeless. Columbus, OH: The Ohio Coalition for the Homeless.

This 138-page manual provides detailed information on how to open a shelter for the homeless. It covers all pertinent issues including community relations, location, code compliance, funding, development of services and procedures, and strategies for assisting specific groups (i.e., the mentally ill and substance abusers). While some of the procedures would only be useful to those in Ohio, most of the information would be useful to groups around the country. To obtain a copy, write the Ohio Coalition for the Homeless, 1066 North High Street, Columbus, OH 43201, (614) 291-1984. Cost: $10.00.

National Directory of Homeless Health Care Projects. Washington, DC: National Association of Community Health Centers, Inc.

To obtain a copy, contact: National Association of Community Health Centers, Inc., 1330 New Hampshire Avenue, NW, Suite 122, Washington, DC 20036, (202) 659-8008. Available at cost.

SAFAH Grants: Aiding Comprehensive Strategies for the Homeless. Rockville, MD: HUD USER, 1988.

This 85-page report gives a detailed description, including program design and funding sources, of 12 SAFAH grantees. To obtain a copy, contact: HUD USER, P.O. Box 6091, Rockville, MD 20850. Cost: $3.00.

Shulte, L. *Inn Between: A Manual on Transitional Housing*. Cleveland, OH: THI Consulting Services, Inc., 1988.

This 133-page manual provides a step-by-step guide on planning, funding, and operating a transitional housing program. To obtain a copy, contact: THI Consulting Service, Inc., 1545 West 25th Street, Box 137A, Cleveland, OH 44113, (216) 781-2250. Cost: $10.00.

State Activities and Programs for the Homeless: A Review of Six States. Washington, DC: The Urban Institute, (202) 857-8551, Sept. 28, 1988.

This publication describes what six state governments are doing for the homeless, highlighting the states' utilization of McKinney Act funds.

Streetreach. Washington, DC: National Association of Community Health Centers, Inc.

This quarterly newsletter provides information on issues relating to health care for the homeless. To obtain copies, contact: National Association of Community Health Centers, Inc., 1330 New Hampshire Avenue, NW, Suite 122, Washington, DC 20036, (202) 659-8008. Free to nonprofit organizations.

Transitional Housing. Washington, DC: Homeless Information Exchange, 1988.

This publication summarizes the basic concepts of transitional housing. To obtain a copy, contact: Homeless Information Exchange, 1830 Connecticut Avenue, NW, Washington, DC 20009, (202) 452-7551. Cost: $10.00.

Appendix: Annotated Address List

Resources for Information and Technical Assistance

The Homeless Information Exchange
1830 Connecticut Avenue, N.W.
Washington, DC 20009
(202) 462-7551

The Homeless Information Exchange is an excellent source of information on exemplary programs, policies, research, and funding sources. This organization documents and promotes successful strategies from around the nation that address and prevent homelessness. The following resources are available:

1. A customized inquiry service enables individuals to request a search on a particular subject area and get model program summaries, references to relevant literature, and contacts with experts in the field. This service is free to direct service providers; others are charged an hourly fee.

2. Several publications are available covering topics from general information on homelessness to more specific descriptions of model programs in areas such as transitional housing, coalition building, and prevention efforts. These publications are available at $10 each.

3. A quarterly newsletter, *HOMEWORDS*, reports information about national and local programs and resources that address homelessness. Each issue highlights model projects, public and private funding strategies, relevant research, and sources of technical assistance. The programs summarized meet a broad range of needs including emergency, transitional, permanent, and preventive strategies. Annual subscriptions are $10.

National Coalition for the Homeless
1621 Connecticut Avenue, NW
Washington, DC 20009
(202) 265-2371

National Coalition for the Homeless
105 East 22nd Street
New York, NY 10010
(212) 460-8110

The coalition is a federation of individuals, agencies, and organizations whose goal is to advocate for decent, affordable housing for everyone. It serves as a clearinghouse for information on homelessness. Through litigation and advocacy for legislative change, the coalition attempts to ensure that the rights of the homeless are protected. The coalition's newsletter, *Safety Network*, provides information on funding, Federal legislation, and local policy developments around the country. The newsletter is free.

Foundation Center
79 Fifth Avenue
New York, NY 10003
(212) 620-4230

Foundation Center
1001 Connecticut Avenue, N.W.
Suite 938
Washington, DC 20036
(202) 331-1400

Field Offices

Foundation Center
312 Sutter Street
San Francisco, CA 94108
(415) 397-0902

Kent H. Smith Library
1442 Hanna Building
Cleveland, OH 44115
(216) 861-1933

The Foundation Center is an independent, nonprofit organization established by foundations to provide information and assistance to groups or individuals who are looking for funding. The center has two national libraries and two field offices. The center also supplies its publications and resources to more than 170 cooperative collections, usually located in libraries, in all 50 states, Canada, Mexico, Puerto Rico, the Virgin Islands, and Great Britain. You can write or call toll-free 1-800-424-9836 for a complete list of addresses and phone numbers of all of the cooperating collections in the Foundation Center's network, as well as information on available publications.

The center provides a variety of resources. Reference materials on fundraising, philanthropy, and proposal writing and directories of funding sources are available. No fee is charged for using the center's libraries or cooperating collections. The Foundation Center's data bases can be accessed online through DIALOG. For more information contact DIALOG Information Services, Inc., Marketing Department, 3460 Hillview Avenue, Palo Alto, CA 94304. Tel 800-334-2564. Subject indexes, called *Comsearch*, of currently reported (1 or 2 years prior) grants are also available in computer printouts or on microfiche.

Two types of subject indexes are available. *Comsearch: Broad Topics* identifies grants made in 26 broad areas and is helpful if you want to examine activities in broad fields of interest such as "children and youth" or "public health." Each printout includes grants of $5,000 or more reported in the last year by 450 major foundations, including the 100 largest. These printouts cost $40 per topic.

Comsearch: Subjects identifies grantmaking activity in 31 highly targeted areas including "homeless", "alcohol and drug abuse," and "mental health." The homeless printout lists grants given to homeless-related projects throughout the country, giving the project name and the size of the grant. Many of the foundations listed have geographic limitations, meaning they will only fund projects located in a certain area (e.g., a certain state); this information is also provided. This printout is a good starting place in looking for sources of funding. A printout costs $20 per subject, and microfiche is $8 per subject.

The center also has foundation annual reports, which are excellent and often comprehensive sources of information. Annual reports usually include a short history of the foundation, the current priorities in funding, a list of all the projects funded in the previous year, and the amount of the awards. Many of the larger foundations publish annual reports.

Foundation files, which include application information, news releases, newspaper clippings, and historical IRS returns, are also provided. These files can provide greater insight into a foundation's priorities and interests. The IRS returns of a foundation are often the only source of information on small foundations. Their tax returns must include all the projects funded in the previous year and the amount given.

Books and other publications are available that give important information on corporations that may give funds and ideas for grassroots fundraising efforts. The Foundation Center's publications are available for use without charge at their libraries and at any of the cooperating library collections. Most cooperating collections have the center's reference works, recent books, and foundation reports along with the tax returns for the foundations within that state. Publications may also be available at public or university libraries.

Grantsmanship Center
P.O. Box 6210
650 South Spring Street, Suite 507
Los Angeles, CA 90014
(213) 689-9222

The Grantsmanship Center is a training organization that provides workshops to staff members from nonprofit organizations to help them develop or improve their management and proposal writing abilities. Since its founding in 1972, the center has trained over 40,000 staff members of public and private agencies on grantmanship, program management, and fundraising. It has publications available for purchase. Three times a year, the center publishes "The Whole Nonprofit Catalog," which contains articles on current issues in the nonprofit sector and information on upcoming workshops and publications.

The Women's Technical Assistance Project
733 15th Street, NW
Suite 510
Washington, DC 20005
(202) 638-0449

The Women's Technical Assistance Project provides technical assistance to low-income groups run by women in the southeastern and southwestern parts of the United States. The project publishes *Church Funding Sources*, a resource guide that includes application forms and detailed information on grantmaking programs sponsored by various religious groups throughout the country. Their fundraising guidelines target community-based organizations, especially those promoting social justice and the development activities of people of color and women. This resource guide costs $40.00 and can be obtained by sending a check to the organization.

National Association of Community Health Centers, Inc.
1330 New Hampshire Avenue, N.W., Suite 122
Washington, DC 20036
(202) 659-8008
Contact: Freda Mitchem, Coordinator of the Health Care for the Homeless Project

The National Association of Community Health Centers (NAHC) is a nonprofit membership organization and public policy advocacy organization representing community and migrant health centers, Health Care for the Homeless Projects funded under the Stewart B. McKinney Act, black lung clinics, and other health provider organizations interested in promoting quality primary health care for the indigent and underserved. NAHC is the main source of technical assistance, training, and information on the Primary Health Care and Substance Abuse Programs funded through the McKinney Act. NAHC resources include workshops, seminars, and conferences on homeless health care issues, a quarterly newsletter, *Streetreach*, that provides information on issues relating to Health Care for the Homeless, and a *National Directory of Homeless Health Newsletter Care Projects* (see bibliography).

Developing Transitional Housing for Families

McAuley Institute
1320 Fenwick Lane, Suite 600
Silver Spring, MD 20910
(301) 588-8110

The McAuley Institute is a national nonprofit corporation founded in 1982 by the Sisters of Mercy. Committed to justice in housing, the McAuley Institute has worked with more than 800 low-income groups to both improve and control housing in their communities. The Institute's resources include technical assistance (e.g., financing and construction issues), a revolving loan fund, a data bank that provides information on publications, funding sources, case studies and so forth, and assistance with advocacy and organizing church-related participation on the local level.

Women's Institute for Housing and Economic Development
179 South Street
Boston, MA 02111
(617) 423-2296

The Institute is a nonprofit organization that provides information and technical assistance to women's organizations and other service groups interested in providing housing and economic opportunities to low-income women and their children. The Institute's National Transitional Housing Technical Assistance Program began in 1988 and offers workshops and individual consultations with nonprofit organizations developing transitional housing for women and families. Most of the hands-on technical assistance is provided to organizations in Massachusetts.

Nonprofit organizations outside this state, however, can set up telephone consultations and purchase any of the available written materials. Two publications are available at cost: *A Manual On Transitional Housing* and *A Development Primer: Starting Housing and Business Ventures by and/or for Women*.

The Enterprise Foundation
505 American City Building
Columbia, MD 21044
(301) 964-1230

The Enterprise Foundation is a national nonprofit organization specializing in developing new approaches for housing the poor. The foundation is currently working in 30 cities across the country and in 2 statewide programs. Nonprofit organizations can contact the foundation for information on what is currently being done. Nonprofit organizations outside the areas where the Enterprise Foundation is involved can still contact the foundation for information and referrals to other housing organizations in their area that may be of assistance.

Runaway and Homeless Youth Act

Competition for Coordinated Networking Grants is held every 3 years, subject to the availability of funds. These regional networks are set up to assist runaway and homeless youth centers in providing and coordinating service. In 1988, 9 networks serving the 10 federal regions received funding. These networks, listed below, are a source of information and technical assistance. The regional contacts for the governmental offices that administer the Runaway and Homeless

Youth Act Programs are also listed below. These offices may also be a source of information and assistance.

Networks

Region I: Connecticut, Massachusetts, Maine, New Hampshire, Rhode Island, and Vermont.
Nancy Jackson
Massachusetts Committee for Children and Youth
14 Beacon Street, Suite 706
Boston, MA 02108
(617) 742-8555

Region II: New Jersey, New York, Puerto Rico, and Virgin Islands.
Margo Hirsch
Empire State Coalition
Room 507
121 Avenue of the Americas
New York, NY 10013
(212) 674-2121
(212) 966-6477

Region III: District of Columbia, Delaware, Maryland, Pennsylvania, Virginia, and West Virginia.
Contact Region IV Network

Region IV: Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, and Tennessee.
Gail L. Kurtz
Southeastern Network of Runaway Youth
337 South Milledge Avenue
Suite 209
Athens, GA 30605
(404) 354-4568

Region V: Illinois, Indiana, Michigan, Minnesota, Ohio, and Wisconsin.
Dennis Murstein
Youth Network Council of Chicago, Inc.
506 South Wabash Avenue
Suite 510
Chicago, IL 60605
(312) 427-2710

Region VI: Arkansas, Louisiana, New Mexico, Oklahoma, and Texas.
Theresa Andreas-Tod
Southwest Network of Youth Services, Inc.
P.O. Box 6503
Austin, TX 78762
(512) 338-1565

Region VII: Iowa, Kansas, Missouri, and Nebraska.
Jack McClure
M.I.N.K., A Network for Runaway and Homeless Youth
P.O. Box 14403
Parkview, MO 64152

Region VIII: Colorado, Montana, North Dakota, South Dakota, Utah, and Wyoming.
Linda Woods
Mountain Plains Youth Network
311 North Washington
Bismarck, ND 58501
(701) 255-7229

Region IX: Arizona, California, Hawaii, Nevada, and the territories.
Nancy Sefcik
Western States Youth Services
221 Petaluma Boulevard, South
Suite B
Sacramento, CA 95814
(707) 763-2213

Region X: Alaska, Idaho, Oregon, and Washington.
Ginger Baggett
Northwest Network of Runaway and Youth Services
94 Third Street
Ashland, OR 97520
(503) 482-8890

Administrative Offices

Region I
Sue Rosen
Office of Human Development Services
JFK Federal Building, Room 2011
Boston, MA 02203
(617) 565-1144

Region II
Dennis Coughlin
Office of Human Development Services
26 Federal Plaza, Room 4149
New York, NY 10278
(212) 264-2974

Region III
David Lett
Director
Office of Community Programs
Office of Human Development Services
3535 Market Street
P.O. Box 13714
Philadelphia, PA 19101
(215) 596-1224

Region IV
Viola Brown
Office of Human Development Services
101 Marietta Tower
Suite 903
Atlanta, GA 30323
(404) 221-2128

Region V
William Sullivan
Office of Human Development Services
105 West Adams, 21st Floor
Chicago, IL 60603
(312) 353-4241

Region VI
Runaway and Homeless Youth
Office of Human Development Services (OHDS)
1200 Main Street, 10th Floor
Dallas, TX 75202
(214) 767-4540

Region VII
Steve Nash
Office of Human Development Services
Federal Office Building, Room 384
601 East 12th Street
Kansas City, MO 64106
(816) 426-5401

Region VIII
Juan Cordova
Office of Human Development Services
Federal Office Building
1961 Stout Street, 9th Floor
Denver, CO 80294
(303) 844-3106

Region IX
Ray Myrick
Office of Human Development Services
50 United Nations Plaza
San Francisco, CA 94102
(415) 556-6153

Region X
Steve Ice
Office of Human Development Services
2201 Sixth Avenue
Mail Stop RX 32
Seattle, WA 98121
(206) 442-0482

Federal Agency Contacts for Stewart B. McKinney Act Programs

Emergency Shelter Grants Program
Contact: James R. Broughman, Director, Entitlement Cities Division or James Forsberg, Director, State and Small Cities Division
U.S. Department of Housing and Urban Development
451 Seventh Street, S.W.
Washington, DC 20410
Formula Cities and metropolitan counties: (202) 755-5977
States: (202) 755-2484

Supportive Housing Demonstration Program
Transitional Housing Demonstration Program
Special Needs Assistance Programs
Contact: Morris Bourne, Transitional Housing Development Staff
U.S. Department of Housing and Urban Development
451 Seventh Street, S.W
Washington, DC 20410
(202) 755-2140

Supplemental Assistance for Facilities to Assist the Homeless
Contact: Edwin Stromberg
U.S. Department of Housing and Urban Development
Office of Policy Development and Research
Room 8126
451 Seventh Street, S.W.
Washington, DC 20410
(202) 426-1520

Health Services for the Homeless
Contact: Joan Holloway, Director
Division of Special Populations Program Development
U.S. Department of Health and Human Services
Health Resources and Services Administration
Parklawn Building 7A22
5600 Fishers Lane
Rockville, MD 20857
(301) 443-8134

Community Mental Health Services Block Grants
Contact: George A. Kanuck, Public Health Advisor
U.S. Department of Health and Human Services
Alcohol, Drug Abuse, and Mental Health Administration (ADAMHA)
Parklawn Building 13C06
5600 Fishers Lane
Rockville, MD 20857
(301) 443-3820

Emergency Community Services Block Grant
Contact: Janet Fox, Office of Community Services
Family Support Administration
370 L'EnFant Promenade
Washington, DC 20447
(202) 252-5300

Community Mental Health Services Demonstration Projects
Contact: Irene Shifren Levine, Ph.D., Director
Office of Programs for the Homeless Mentally Ill
U.S. Department of Health and Human Services
National Institute of Mental Health
Parklawn Building 7C06
5600 Fishers Lane
Rockville, MD 20857
(301) 443-3706

Community Demonstration Projects for Alcohol and Drug Abuse Treatment
Contact: Barbara Lubran, Chief
Homeless Demonstration and Evaluation Branch
U.S. Department of Health and Human Services
National Institute on Alcohol Abuse and Alcoholism
Parklawn Building 16C02
5600 Fishers Lane
Rockville, MD 20857
(301) 443-0786

Adult Education for the Homeless Program
Contact: Ron Pugsley or Sarah Newcomb
U.S. Department of Education
Division of Adult Education and Literacy
400 Maryland Avenue, S.W.
Washington, DC 20202-7320
(202) 732-2390

Homeless Children and Youth Education Grants
Contact: Francine Vinson, Education Program Specialist
U.S. Department of Education
Office of Elementary and Secondary Education
Room 2035
400 Maryland Avenue, S.W.
Washington, DC 20202-6132
(202) 732-4728

Aid to Families with Dependent Children; Transitional Housing Demonstrations
Contact: Janet Fox
Office of Community Services
Family Support Administration
370 L'EnFant Promenade
Washington, DC 20447
(202) 252-5300

Contacts for Other Federal Programs Not Part of the McKinney Act

Runaway and Homeless Youth Program
Contact: Carol Behrer
Administration for Children Youth and Families
Family and Youth Services Bureau
P.O. Box 1182
Washington, DC 20013
(202) 245-0102

Community Development Block Grant Assistance
Entitlement Cities Division
Room 7282
U.S. Department of Housing and Urban Development
415 Seventh Street, S.W.
Washington, DC 20410
(202) 755-5977

State and HUD Administered Small Cities Program
Room 7184
U.S. Department of Housing and Urban Development
451 Seventh Street, S.W.
Washington, DC 20410
(202) 755-6322

Social Services Block Grant (Title XX)
Division of Research Demonstration
U.S. Department of Health and Human Services
200 Independent Avenue, S.W.
Washington, DC 20201
(202) 472-3026

Alcohol and Drug Abuse and Mental Health Services Block Grant
National Association of State Alcohol and Drug Abuse Directors, Inc.
(NASADAD)
444 North Capital Street, N.W.
Suite 520
Washington, DC 20001
(202) 783-6868

National Clearinghouse for Alcohol and Drug Information
P.O. Box 2345
Rockville, MD 20852
(301) 468-2600

Action
Office of Public Affairs
1100 Vermont Avenue, N.W., #11100
Washington, DC 20525
(202) 634-9108

Health Care Financing Administration (HCFA)
Room 314 G
H. H. Humphrey Building
200 Independence Avenue, S.W.
Washington, DC 20201
(202) 245-6113

Head Start
Head Start Bureau
P.O. Box 1182
Washington, DC 20013
(202) 245-0575

HUD Regional Offices

The first line of the mailing address for all offices is:

> U.S. Department of Housing and Urban Development

Region I: Connecticut, New Hampshire, Rhode Island, Maine, Vermont, and Massachusetts.
Boston Regional Office
Room 375
Thomas P. O'Neill, Jr. Federal Building
10 Causeway Street
Boston, MA 02222-1092
(617) 565-5234

Region II: New York, New Jersey, Puerto Rico, and Virgin Islands.
Joseph B. Lynch, Acting Regional Administrator
New York Regional Office
26 Federal Plaza
New York, NY 10278-0068
(212) 264-8053

Region III: Maryland, West Virginia, Pennsylvania, Virginia, District of Columbia, and Delaware.
Harry Staller, Deputy Regional Administrator
Philadelphia Regional Office
Liberty Square Building
105 South Seventh Street
Philadelphia, PA 19106-3392

Region IV: Alabama, South Carolina, Florida, North Carolina, Mississippi, Tennessee, Kentucky, and Georgia.
Raymond A. Harris, Regional Administrator
Atlanta Regional Office
Richard B. Russell Federal Building
75 Spring Street, S.W.
Atlanta, GA 30303-3388
(404) 331-5136

Region V: Ohio, Michigan, Indiana, Wisconsin, Minnesota, and Illinois.
Gertrude Jordan, Regional Administrator
Chicago Regional Office
626 West Jackson Boulevard
Chicago, IL 60606-5601
(312) 353-5680

Region VI: New Mexico, Texas, Arkansas, Louisiana, and Oklahoma.
Sam R. Moseley, Regional Administrator, Regional Housing Commissioner
Fort Worth Regional Office
1600 Throckmorton
Post Office Box 2905
Fort Worth, TX 76113-2905
(817) 885-5401

Region VII: Iowa, Nebraska, Missouri, and Kansas.
Thomas Lawler
Kansas City Regional Office
Professional Building
1103 Grand Avenue
Kansas City, MO 64106-2496
(816) 374-6432

Region VIII: Wyoming, North Dakota, Montana, Utah, South Dakota, and Colorado.
Issaiah Kelley, Jr., Acting Regional Administrator
Denver Regional Office
Executive Tower Building
1405 Curtis Street
Denver, CO 80202-2349
(303) 844-4513

Region IX: California, Hawaii, Nevada, Arizona, Guam, and American Samoa.
Robert DeMonte
San Francisco Regional Office
Phillip Burton Federal Building and U.S. Courthouse
450 Golden Gate Avenue
P.O. Box 36003
San Francisco, CA 94102-3448
(415) 556-4752

Indian Programs Office
Region IX
C. Raphael Mecham
Suite 400
One North First Street
Phoenix, AZ 85004-2360
(602) 261-4156

Region X: Alaska, Idaho, Oregon, and Washington.
William Y. Nishimura
Seattle Regional Office
Arcade Plaza Building
1321 Second Avenue
Seattle, WA 98101-2058
(206) 442-5414

Action Regional Offices

Region I: Connecticut, Maine, Massachusetts, New Hampshire, and Rhode Island. and Vermont.
Action
Room 473
10 Causeway Street
Boston, MA 02222-1039
Telephone: (617) 565-7000

Region II: New Jersey, New York, Puerto Rico, and the Virgin Islands.
Action
Room 758
Six World Trade Center
New York, NY 10048-0206
Telephone: (212) 446-3481

Region III: KT, Maryland, Delaware, Ohio, Pennsylvania, Virginia, West Virginia, and District of Columbia.
Action
Room 108
U.S. Customs House
Second and Chestnut Streets
Philadelphia, Pa 19106-2912
Telephone: (215) 597-9972

Region IV: Alabama, Florida, Georgia, Mississippi, North Carolina, South Carolina, and Tennessee.
Action
Room 1003
101 Marietta Street, N.W.
Atlanta, GA 30323-2301
Telephone: (404) 331-2859

Region V: Illinois, Indiana, Iowa, Michigan, Minnesota, and Wisconsin.
Action
Sixth Floor
10 West Jackson Boulevard
Chicago, IL 60604-3964
Telephone: (312) 353-5107

Region VI: Arkansas, Kansas, Louisiana, Missouri, New Mexico, Oklahoma, and Texas.
Action
Room 6B11
1100 Commerce Street
Dallas, TX 75242-0696
Telephone: (214) 767-9494

Region VIII: Colorado, Wyoming, Montana, Nebraska, North Dakota, South Dakota, and Utah.
Action
Suite 2930
Executive Tower Building
1405 Curtis Street
Denver, CO 80202-2349
Telephone: (303) 844-2671

Region IX: Arizona, California, Hawaii, Nevada, Guam, and American Samoa.
Action
Room 530
211 Main Street
San Francisco, CA 94105-1914
Telephone: (415) 974-0673

Region X: Alaska, Idaho, Oregon, and Washington.
Action
Suite 3039
Federal Office Building
909 First Avenue
Seattle, WA 98174-1103
Telephone: (206) 442-1558

Head Start Regional Offices

Region I: Connecticut, Maine, Massachusetts, New Hampshire, Vermont, and Rhode Island.
Office of Human Development Services
Department of Health and Human Services
Room 2000 Federal Building
Government Center
Boston, MA 02203
(617) 223-6450

Region II: New York, New Jersey, Puerto Rico, and the Virgin Islands
Office of Human Development Services
Department of Health and Human Services
Room 4149 Federal Building
26 Federal Plaza
New York, NY 10007
(212) 264-3472

Region III: Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, and West Virginia.
Office of Human Development Services
Department of Health and Human Services
3535 Market Street
(P.O. Box 13716)
Philadelphia, PA 19101
(215) 596-0356

Region IV: Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, and Tennessee.
Office of Human Development Services
Department of Health and Human Services
101 Marietta Tower
Suite 903
Atlanta, GA 30323
(404) 242-2134

Region V: Illinois, Idaho, Michigan, Minnesota, Ohio, and Wisconsin.
Office of Human Development Services
Department of Health and Human Services
21st Floor
105 West Adams
Chicago, IL 60603
(312) 353-8322

Region VI: Arkansas, Louisiana, New Mexico, Oklahoma, and Texas.
Office of Human Development Services
Department of Health and Human Services
1200 Main Tower Building
Dallas, TX 75202
(214) 767-2976

Region VII: Iowa, Kansas, Missouri, and Nebraska.
Office of Human Development Services
Department of Health and Human Services
601 East 12th Street
Room 384 Federal Building
Kansas City, MO 64106
(816) 374-3981

Region VIII: Colorado, Montana, North Dakota, Utah, Wyoming, and South Dakota.
Office of Human Development Services
Department of Health and Human Services
Room 908
1961 Stout Street
Denver, CO 80294
(303) 844-2622

Region IX: Arizona, California, Hawaii, Nevada, and the Pacific Trust Territories
Office of Human Development Services
Department of Health and Human Services
Room 455
50 United Nations Plaza
San Francisco, CA 94102
(415) 556-4027

Region X: Alaska, Idaho, Oregon, and Washington.
Office of Human Development Services
Department of Health and Human Services
Third and Broad Building
2901 Third Avenue
Seattle, WA 98121
(206) 442-2430

State CDBG Program Managers

(as of August 1989)

Alabama
Don Reid
Department of Economic and Community Affairs
3465 Norman Bridge Road
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Montgomery, AL 36105
(205) 284-8769

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Department of Community and Regional Affairs
Pouch BC
Juneau, AK 99811
(907) 465-4890

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Rivko Knox
Department of Commerce
1700 W. Washington, #505
Phoenix, AZ 85007
(602) 542-4920

Arkansas
Jane Ahrend
Arkansas Industrial Development Commission
#1 Capitol Mall South
Little Rock, AR 72201
(501) 682-1211

California
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Department of Housing and Community Development
P.O. Box 952051
Sacramento, CA 94252-2051
(916) 445-6000

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Department of Local Affairs
518 Centennial Building
1313 Sherman Street
Denver, CO 80203
(303) 866-2771

Connecticut
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Department of Housing
1179 Main Street
Hartford, CT 06103-1089
(203) 566-5310

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Douglas Croft
State Housing Authority
18 The Green, P.O. Box 1401
Dover, DE 19903
(302) 736-4263

Florida
Linda Frohock
Department of Community Affairs
2740 Centerview Drive
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Brian Williamson - E.D.
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Wayne Forrey
Division of Economic and Community Affairs
State Capitol Building, Room 108
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Illinois
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Department of Commerce and Community Affairs
620 East Adams Street
Springfield, IL 62701
(217) 785-6154

Indiana
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Division of Internal Audit
Department of Commerce
1 N. Capitol, Suite 700
Indianapolis, IN 46204-2243
(317) 232-8333

Iowa
Lane Palmer
Department of Economic Development
200 East Grand Avenue
Des Moines, IA 50309
(515) 281-7240

Kansas
Bill Montgomery
Department of Economic Development
400 SW 8th Avenue, #500
Topeka, KS 66603-3957
(913) 296-2725

Kentucky
Sally Hamilton, Director
Department of Local Government
Office of Community Development
Capitol Plaza Tower, 2nd Floor
Frankfort, KY 40601
(502) 564-2382

Louisiana
Suzie Elkins
Division of Administration
P.O. Box 94095
Baton Rouge, LA 70804
(504) 342-7410
Herman Dubon
State Planning Office

Maine
Leonard Dow
Department of Economic and Community Development
219 Capitol Street
State House Station #130
Augusta, ME 04333
(207) 289-3154

Maryland
Tara Clifford
Department of Housing and Community Development
45 Calvert Street
Annapolis, MD 21401
(301) 261-1402 x2854

Massachusetts
Scott Hebert
Department of Community Affairs
100 Cambridge Street, 14th Floor
Boston, MA 02202
(617) 727-8690

Michigan
J. Brian Raymond
Michigan Strategic Fund
Department of Commerce
525 W. Ottawa, P.O. Box 30234
Lansing, MI 48909
(517) 373-1159
Roy Pentilla, Manager
Portfolio Management
(517) 373-7628

Minnesota
Louis Jambois
Deparment of Energy and Economic Development
9th Floor, American Center Building
150 East Kellogg
St. Paul, MN 55101
(612) 297-3172

Mississippi
Gary Anderson
Department of Community Development
301 W. Pearl Street
Jackson, MS 39202-3096
(601) 949-2189

Missouri
Terry Martin
Department of Economic Development
Economic Development Programs
301 West High Street, P.O. Box 118
Jefferson City, MO 65102
(314) 751-3600

Montana
David Cole
Department of Commerce
1424 9th Avenue
Helena, MT 59620
(406) 444-4481

Nebraska
Jenne Garvey-Rodriguez
Department of Economic Development
Box 94666 - 301 Centennial Mall South
Lincoln, NE 68509
(402) 471-4388

Nevada
Andy Grose
Committee on Economic Development
Capitol Complex
Carson City, NV 89710
(702) 687-4325

New Hampshire
Bill Ray
Office of State Planning
2-1/2 Beacon Street
Concord, NH 03301
(603) 271-2155

New Jersey
Roger Hoch
Department of Community Affairs
South Broad & Front Street, CN 806
Trenton, NJ 08625-0806
(609) 633-6259

New Mexico
Al Lobato
Local Government Division
206 Lamy Building
Sante Fe, NM 87501
(505) 827-4950

New York
Peg Morrison
Division of Housing and Community Renewal
38-40 State Street
Albany, NY 12207
(212) 488-3219

North Carolina
John Downs
Department of Natural Resources and Community Development
Division of Community Assistance
P.O. Box 27687
Raleigh, NC 27611
(919) 733-2850

North Dakota
Richard Gray
Office of Intergovernmental Assistance
State Capitol, 14th Floor
Bismark, ND 58505
(701) 224-2094

Ohio
Gregory Carr
Office of Local Government Services
Department of Development
77 South High Street, P.O. Box 1001
Columbus, OH 43266-0101
(614) 466-2285

Oklahoma
Sherwood Washington
Department of Commerce
6601 Broadway Extension
Oklahoma City, OK 73116-8214
(405) 843-9770

Oregon
Yvonne Addington
Economic Development Department
595 Cottage Street, N.E.
Salem, OR 97310
(503) 378-3732

Pennsylvania
Riley Stoy
Department of Community Affairs
515 Forum Building
Harrisburg, PA 17120
(717) 783-3910

Puerto Rico
Pedro Franqui Acosta
Municipal Services Administration
G.P.O. Box 70167
San Juan, PR 00936
(809) 753-6080

Rhode Island
Susan Smith
Department of Intergovernmental Relations
275 Westminster Mall
Providence, RI 02903
(401) 277-2895

South Carolina
Doug McKay
Division of Community and Intergovernmental Affairs
1205 Pendleton Street, Suite 416
Columbia, SC 29201
(803) 734-0420

South Dakota
Fred Baatz
Division of State and Community Development
Governor's Office of Economic Development and Tourism
5032 Capitol Lake Plaza
Pierre, SD 57501
(605) 773-5032

Tennessee
Paula Lovett
Department of Economic and Community Development
320 6th Avenue North, 6th Floor
Nashville, TN 37219
(615) 741-6201

Texas
Ruth Cedillo
Department of Commerce
P.O. Box 12728
Austin, TX 78711-3166
(512) 320-9507
Gene Shelton, Deputy Director
Program Compliance

Utah
Richard Walker
Department of Community and Economic Development
6233 State Office Building
Salt Lake City, UT 84114
(801) 538-3425

Vermont
Roman Kokodyniak
Department of Housing and Community Affairs
Pavilion Office Building, 4th Floor
Montpelier, VT 05602
(802) 828-3217

Virginia
Todd Christensen
Department of Housing and Community Development
205 N. 4th Street
Richmond, VA 23219
(804) 786-4474
Bill Shelton
Department of Housing and Community Development

Washington
Chris Lowell
Department of Community Development
9th & Columbia Building, GH-51
Olympia, WA 98504
(206) 586-8974

West Virginia
Larry Long
Governor's Office of Economic and Community Development
State Capitol Complex, Room 553B
Charleston, WV 25305
(304) 348-4010

Wisconsin
Phillip Albert
Department of Development
123 W. Washington Avenue
P.O. Box 7970
Madison, WI 53707
(608) 267-0345

Wyoming
John Sedgwick
Department of Economic Development and Stabilization Board
Herschler Building
Cheyenne, WY 82002
(307) 777-7284

Project Contacts for the Community Mental Health Services Youth Demonstration Grants

Portland Area Homeless Children's Mental Health Project
Contact: Bureau of Children with Special Needs
Maine Department of Mental Health and Mental Retardation
Rachel Olney, Director
156 High Street
Portland, ME 04101
(207) 879-4298

Project Mental Health for Homeless Youth
Contact: John Pierce
Division of Mental Health
Vermont Department of Mental Health
103 South Maine Street
Waterbury, Vermont 05676
(802) 241-2621

District of Columbia Mobile Mental Health Team for Homeless Children and Families
Contact: Peter Parham
Office of the Director
Department of Human Services, #700
801 North Capitol Street, N.E.
Washington, DC 20002
(202) 727-0310

State Agency Contacts for Emergency Community Services Homeless Grant Program (EHP)

Alabama
Mr. Cliff Walker
Chief
Community Services Division
Department of Economic and Community Affairs
P.O. Box 2939
3465 Norman Bridge Road
Montgomery, AL 36105-0939
Staff contact: Mr. Andre Epps
(205) 284-8957

Alaska
Ms. Judith A. Holden
Block Grants Administrator
Department of Community and Regional Affairs
P.O. Box BC
Juneau, AL 99811
Staff contact: Ms. Judith Holden
(907) 465-4890

Arizona
Ms. Lynda Moore-Cannon
Director
Department of Economic Security
P.O. Box 6123
Phoenix, AZ 85005
Staff contact: Ms. Karen Novachek
(602) 229-2736
Site Code 0862

Arkansas
Mr. Thomas E. Green
Assistant Deputy Director
Office of Community Services
Arkansas Department of Human Services
P.O. 1437, Slot 1330
Little Rock, AR 72203-1437
Staff contact: Mr. Thomas Green
(501) 682-8715

California
Ms. Theresa Alvillar-Speake
Director
Department of Economic Opportunity
State of California
1600 Ninth Street, Room 340
Sacramento, CA 95814
Staff contact: Mr. Russ Salazar
(916) 323-8832

Colorado
Mr. Timothy W. Schultz
Executive Director
Department of Local Affairs
1313 Sherman Street, Room 518
Denver, CO 80203
Staff contact: Mr. Bill Verbeten
(303) 866-2205

Connecticut
Mr. Elliott A. Ginsberg
Commissioner
Connecticut State Department of Human Resources
1049 Asylum Avenue, Third Floor
Hartford, CT 06105-2431
Staff contact: Mr. Alan Carbonneau
(203) 566-8776

Delaware
Ms. Frances M. West
Secretary
Department of Community Affairs
P.O. Box 1401
156 South State Street
Dover, DE 19903
Staff contact: Mr. Dennis Savage
(302) 571-3491

Florida
Mr. Thomas Pelham
Secretary
Department of Community Affairs
2740 Centerview Drive
Tallahassee, FL 32399-2100
Staff contact: Dr. Susan Cook
(904) 488-7541

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James G. Ledbetter, Ph.D.
Commissioner
Department of Human Resources
47 Trinity Avenue, S.W.
Atlanta, GA 30334-1202
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(404) 656-4497

Hawaii
Mr. Walter W. F. Choy
Executive Director
Office of Community Services
Department of Labor and Industrial Relations
335 Merchant Street, Room 101
Honolulu, HI 96813
Staff contact: Mr. Walter Choy
(808) 548-2130

Idaho
Mr. Richard P. Donovan
Director
Department of Health and Welfare
State House Mail
450 West State Street
Boise, ID 83720
Staff contact: Mr. Ron Adcock
(208) 334-5730

Illinois
Mr. Steve McClure
Acting Director
Illinois Department of Commerce and Community Affairs
Bureau of Program Administration
620 East Adams Street, Fifth Floor
Springfield, IL 62701
Staff contact: Mr. Grey Warner
(217) 785-6202

Indiana
Mr. Barry Chambers
Commissioner
Indiana Department of Human Services
P.O. Box 7083
Indianapolis, IN 46207-7083
Staff contact: Mr. Richard Irwin
(317) 232-1147

Iowa
Mr. James E. Smith
Administrator
Division of Community Action Agencies
Department of Human Rights
Lucas State Office Building
Des Moines, IA 50319
Staff contact: Mr. Rodney Huenemann
(515) 281-3951

Kansas
Mr. Winston Barton
Secretary
Department of Social and Rehabilitative Services
Docking State Office Building
Topeka, KS 66612
Staff contact: Ms. Norma Phillips
(913) 296-4990

Kentucky
Harry J. Cowherd, M.D.
Secretary
Cabinet of Human Resources
275 Main Street
Frankfort, KY 40621
Staff contact: Joyce Young
(502) 564-6750

Louisiana
Ms. Phyllis Coleman Mouton
Secretary of Labor
Louisiana Department of Labor
Community Services Block Grant
1001 North 23rd Street
Baton Rouge, LA 70804
Staff contact: Mr. C. Gino Spina
(504) 342-3053

Maine
Ms. Nicola C. Kobritz
Director
Division of Community Services
State House, Station #73
Augusta, ME 04333
Staff contact: Ms. Karen Schuler
(207) 289-3771

Maryland
Ms. Jacqueline H. Rogers
Secretary
Maryland Department of Housing and Community Development
45 Calvert Street
Annapolis, MD 21401-1907
Staff contact: Mr. Charles H. Smallwood
(301) 974-3416

Massachusetts
Mr. William Concannon
Acting Assistant Secretary
Executive Office of Communities and Development
100 Cambridge Street, Room 1103
Boston, MA 02202
Staff contact: Ms. Noel Wiggins
(617) 727-0050

Michigan
Ms. Elizabeth P. Howe
Director
Michigan Department of Labor
P.O. Box 30015
Lansing, MI 48909
Staff contact: Ted DeLeon
(517) 699-1274

Minnesota
Ms. Valerie Jerich
Director
Economic Opportunity Office
Department of Jobs and Training
670 American Center Building
150 East Kellog Boulevard
St. Paul, MN 55101
Staff contact: EHP-Mr. Mark Kaszynski
(612) 297-2590

Mississippi
Ms. Beatrice J. Branch
Executive Director
Governor's Office of Federal-State Programs
421 West Pascagoula Street
Jackson, MS 39203
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(601) 949-2192

Missouri
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Director
Division of Family Services
Department of Social Services
CSBG Administrative Unit
308 Chestnut Street
Jefferson City, MO 65101
Staff contact: Mr. Charles McCann
(314) 751-6789

Montana
Ms. Julia Robinson
Director
Montana Department of Social and Rehabilitative Services
P.O. Box 4210
Helena, MT 59604
Staff contact: Mr. Jim Nolan
(406) 444-4540

Nebraska
Mr. Kermit R. McMurry
Director
Nebraska Department of Social Services
P.O. Box 95026
Lincoln, NE 68509-5026
Staff contact: Ms. Brenda Bostic
(402) 471-9370

Nevada
Ms. Linda Ryan
Welfare Administrator
State Welfare Division
Nevada Department of Human Resources
2527 North Carson Street
Carson City, NV 89710
Staff contact: Ms. Patty Williams
(702) 885-5904
(702) 885-4889

New Hampshire
Mr. W. H. Dale Townley-Tilson
Director
Division of Human Resources
Third Floor
11 Depot Street
Concord, NH 03301
Staff contact: Mr. Gary Cain
(603) 271-2611

New Jersey
Mr. Charles A. Richman
Assistant Commissioner
New Jersey Department of Community Affairs
101 South Broad Street, CN 814
Trenton, NJ 08625-0814
Staff contact: Mr. Richard Knight
(609) 292-3931

New Mexico
Ms. Dorian Dodson
Planner Director
Income Support Division, Room 506
Human Resource Department
P.O. Box 2348
Sante Fe, NM 87504-2348
Staff contact: Ms. Dorian Dodson
(505) 827-7264

New York
Ms. Valerie Somersille
Director
Division of Economic Opportunity
New York Department of State
162 Washington Avenue, 7th Floor
Albany, NY 12231
Staff contact: Ms. Evelyn Harris
(518) 474-5741

North Carolina
Mr. George C. Jones
Director
Division of Economic Opportunity
Department of Human Resources and Community Development
2413 Crabtree Boulevard, #119
Raleigh, NC 27610
Staff contact: Mr. Lawrence D. Wilson
(919) 733-2633

North Dakota
Ms. Shirley R. Dykshoorn
Director
North Dakota Office of Intergovernmental Assistance
State Capitol, 14th Floor
600 East Boulevard Avenue
Bismarck, ND 58505-0170
Staff contact: Ms. Shirley Dykshoorn
(701) 224-2094

Ohio
Ms. Roberta Garber
Deputy Director, CDD
Ohio Department of Development
Community Development Division
P.O. Box 1001
Columbus, OH 43266-0101
Staff contact. Mr. Terry Wilkins
(614) 466-6014

Oklahoma
Mr. Donald D. Paulsen
Executive Director
Oklahoma Department of Commerce
6601 Broadway Extension
Oklahoma City, OK 73126-0980
Staff contact: Mr. Sherwood Washington
(405) 843-9770

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Mr. Victor Vasquez, Jr.
Manager
State Community Services
Department of Human Resources
207 Public Service Building
Salem, OR 97310
Staff contact:
(503) 378-4729

Pennsylvania
Mr. Dennis Darling
Director
Bureau of Human Resources
358 Forum Building
Harrisburg, PA 17120
Staff contact: Mr. Michael Tucci
(717) 783-2445

Rhode Island
Ms. Nancy Bordeleau
Director
Department of Human Services
600 New London Avenue
Cranston, RI 02920
Staff contact: Mr. Paul Goulet
(401) 464-1891

South Carolina
Mr. William E. Gunn
Director
Division of Economic Opportunity
Office of the Governor
1205 Pendelton Street
Columbia, SC 29201
Staff contact: Mr. Bobby J. Pearson
(803) 734-0357

South Dakota
Mr. Jeff Holden
Director
Community Assistance Program
Department of Commerce and Regulation
500 East Capitol
Pierre, SD 57501-5070
Staff contact: (605) 773-3178

Tennessee
Mr. Robert Grunow
Commissioner
Tennessee Department of Human Services
Citizen Plaza Building, 15th Floor
400 Deadrick Street
Nashville, TN 37219-5456
Staff contact: Ms. Nancy Whittemore, 14th Floor
(615) 741-0735

Texas
Mr. Willie L. Scott
Executive Director
Texas Department of Community Affairs
8317 Cross Park Drive
Austin, TX 78754-5124
Staff contact: Mr. Lucio Varela
(512) 834-6000

Utah
Mr. Stanley B. Parrish
Director
Department of Community and Economic Development
6290 State Office Building
Salt Lake City, UT 84114
Staff contact: Mr. David W. Adams
(801) 538-3368

Vermont
Ms. Pamela J. Greene
Director
State Economic Opportunity Office
Vermont Agency of Human Services
103 South Main Street
Waterbury, VT 05676
Staff contact: Mr. Tony Morgan
(802) 241-2454

Virginia
Ms. Fay G. Lohr
Director
Office of Community Services
Department of Social Services
8007 Discovery Drive
Richmond, VA 23229-8699
Staff contact: Ms. Barbara Boone
(804) 662-9272

Washington
Mr. Chuck Clarke
Director
Department of Community Development
Mail Stop: GH-51
Ninth and Columbia Building
Olympia, WA 98504-4151
Staff contact: Ms. Peggy Jo Mihata
(206) 753-4979

West Virginia
Mr. Joseph L. Barker
Manager
Office of Economic Opportunity
Community Development Division
Second Floor
1204 Kanawha Boulevard, East
Charleston, WV 25301
Staff contact: Mr. Joseph Barker
(304) 348-8860

Wisconsin
Ms. Patricia A. Goodrich
Secretary
Wisconsin Department of Health and Social Services
One West Wilson Street
Madison, WI 53707
Staff contact: Mr. Robert Neal Smith
(608) 266-0073

Wyoming
Mr. Gary E. Maier
Community Services Manager
Division of Community Programs
Department of Health and Social Services
Hathaway Building, Room 361
Cheyenne, WY 82002-0710
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(307) 777-6779

American Samoa
Mr. John Ah Sue
Director
Department of Human Resources
American Samoa Government
Pago Pago, American Samoa 96799
Staff contact: Mr. John Faumuina
(684) 633-5155

District of Columbia
Mr. Peter P. Parham
Director
DC Department of Human Services
Room 700
801 North Capital Street, N.E.
Washington, DC 20002
Staff contact: Ms. Mildren Harper
(202) 724-0310

Guam
Honorable Ricardo J. Bordallo
Governor of Guam
Territory of Guam
P.O. Box 2950
Agana, Guam 96910
Staff contact: Not Available

Mariana Islands
Honorable Pedro Tenorio
Governor
Commonwealth of the Northern Mariana Islands
Saipan, Mariana Islands 96905
Staff contact: Not Available

Palau
Honorable Thomas O. Remengesau
President
Republic of Palau
P.O. Box 100
Koror, Palau 96940
Staff contact: Not Available

Puerto Rico
Mr. Norberto Viero Perez
Executive Director
Office of the Governor
Office of Economic Opportunity
Call Box 50067
San Juan, PR 00901
Staff contact: Mr. Joe Alverez
(809) 724-7900, ext. 281

Virgin Islands
Mrs. Jule C. Rhymer
Commissioner
Department Of Human Services
Barbel Plaza South
St. Thomas, Virgin Islands 00802
Staff Contact: Ms. Elizabeth Casner
(809) 776-7796

Foundations

Public Welfare Foundation
2600 Virginia Avenue, N.w.
Suite 505
Washington, Dc 20037
(202) 965-1800

The Better Homes Foundation
189 Wells Avenue
Newton Center, Ma 02159
(617) 964-3834

Robert Wood Johnson Foundation
Rt. 1 and College Road
P.O. Box 2316
Princeton, Nj 08543-2316
(609) 452-8701

Gannett Company, Inc., Sites

Arizona	
Phoenix	Kpnx-tv, Gannett Outdoor
Tucson	Tucson Citizen
Arkansas	
Little Rock	Arkansas Gazette
California	
Berkeley-bay Area	Gannett Outdoor
Indio	Daily News
Los Angeles	KIIS/KIIS-FM, Gannett Outdoor
Marin County	Marin Independent Journal
Palm Springs	The Desert Sun
Salinas	Salinas Californian
San Bernardino	The San Bernardino
county Sun	
San Diego	KSDO/KSWV-FM,
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Colorado	
Denver	KUSA-TV, Gannett Outdoor
Fort Collins	Fort Collins Coloradoan
Connecticut	
New Haven	Gannett Outdoor
Norwich	Norwich Bulletin
Delaware	
Wilmington	The News Journal
District of Columbia	
Metropolitan Washington Area	Gannett Co., Inc., USA TODAY, WUSA-TV
Florida	
Brevard County	FLORIDA TODAY
Fort Myers	News-Press
Jacksonville	WTLV-TV
Pensacola	Pensacola News Journal
Tampa-St. Petersburg	WDAE, WUSA-FM
Georgia	
Atlanta	WXIA-TV
Gainesville	The Times
Guam	
Agana	Pacific Daily News
Hawaii	
Honolulu	Honolulu Star-Bulletin
Idaho	
Boise	The Idaho Statesman
Illinois	
Chicago	WGCI/WGCI-FM, Gannett Outdoor
Danville	Commercial-News
Rockford	Rockford Register Star
Indiana	
Lafayette	Journal and Courier
Marion	Chronicle-Tribune
Richmond	Palladium-Item
Iowa	
Des Moines	The Des Moines Register

Iowa City	Iowa City Press-Citizen
Kentucky	
Louisville	The Courier Journal, Gannett Direct Marketing Services
Louisiana	
Monroe	News-Star
Shreveport	The Times
Massachusetts	
Boston	WLVI-TV
Michigan	
Battle Creek	Battle Creek Enquirer
Detroit	The Detroit News, Gannett Outdoor
Flint	Gannett Outdoor
Grand Rapids	Gannett Outdoor
Lansing	Lansing State Journal
Port Huron	Times Herald
Minnesota	
Minneapolis-St. Paul	KARE-TV
St. Cloud	St. Cloud Times
Mississippi	
Hattiesburg	Hattiesburg American
Jackson	Clarion-Ledger
Missouri	
Kansas City	KCMO-AM/FM, Gannett Outdoor
St. Louis	KUSA, KSD-FM, Gannett Outdoor
Springfield	The News-Leader
Nevada	
Reno	Reno Gazette-Journal
New Jersey	
Bridgewater	The Courier-News
Camden	The Courier-Post
Fairfield	Gannett Outdoor
Vineland	The Daily Journal
New York	
Binghamton	Press & Sun-Bulletin
Elmira	Star-Gazette
Ithaca	The Ithaca Journal
New York City	Gannett Outdoor Headquarters, Louis Harris & Associates, USA WEEKEND
Niagara Falls	Niagara Gazette
Poughkeepsie	Poughkeepsie Journal
Rochester	Democrat and Chronicle Times-Union
Saratoga Springs	The Saratogian
Utica	Observer-Dispatch
Westchester	Westchester-Rockland Newspapers
Mamaroneck	The Daily Times
Mount Vernon	The Daily Argus
New Rochelle	The Standard-Star
Ossining	The Citizen Register
Peekskill	The Star
Port Chester	The Daily Item
Tarrytown	The Daily News
West Nyack-Rockland	The Journal-News
White Plains	The Reporter Dispatch
Yonkers	The Herald Statesman
North Carolina	
Greensboro	WFMY-TV
Ohio	
Chillicothe	Chillicothe Gazette
Cincinnati	The Cincinnati Enquirer
Fremont	The News-Messenger
Marietta	The Marietta Times
Port Clinton	News Herald
Oklahoma	
Muskogee	Muskogee Daily Phoenix and Times Democrat
Oklahoma City	KOCO-TV
Oregon	
Salem	Statesman-Journal
Pennsylvania	
Chambersburg	Public Opinion
Lansdale	The Reporter
Tarentum	Valley News Dispatch
South Dakota	
Sioux Falls	Argus Leader
Tennessee	
Jackson	The Jackson Sun
Nashville	The Tennessean
Texas	
Austin	KVUE-TV
Dallas	KOAI-FM
El Paso	The El Paso Times
Houston	KKBQ/KKBQ-FM, Gannett Outdoor
Vermont	
Burlington	The Burlington Free Press
Virginia	
Arlington	Gannett Co., Inc., USA TODAY

Virgin Islands	
St. Thomas	The Virgin Islands Daily News
Washington	
Bellingham	The Bellingham Herald
Olympia	The Olympian
Seattle	KNUA-FM
West Virginia	
Huntington	The Herald-Dispatch
Wisconsin	
Green Bay	Green Bay Press-Gazette
Wausau	Wausau Daily Herald
Canada	
Toronto	Mediacom Headquarters
Mississauga	Mediacom
Montreal	Mediacom
Quebec City	Mediacom
Winnipeg	Mediacom

Information provided by the Gannett Foundation, June 1989.

Corporations and Businesses

In looking for potential sources of funding for homeless family programs, we wrote to many large corporations' foundations and giving programs to find out their most recent priorities for funding. Of those who responded, only a few corporations provide funding to local homeless-related projects nationwide or in a large region of the country. Information on these corporate foundations and giving programs is provided below.

Some of the corporations that responded give all or most of their funding for human service programs to local chapters of the United Way. Other corporations that responded give funding to homeless programs but only those in a limited geographic area, e.g., in the city or State where their corporate headquarters is located or only where they have operating facilities. Many of this type run decentralized giving programs where each operating facility sets the priorities (within general guidelines set by the corporation) for giving based on local needs. Some of these operating facilities control their own budgets for making grants. Thus, homelessness may be a priority at one operating facility but not at another. We encourage you to contact the local operating facilities (manufacturing plants, retail stores, etc.) of corporations in your area to find out if they have a foundation or charitable giving program and its current funding priorities.

Other corporations that responded may not give priority to homeless family programs, but these programs are welcome to apply as long as their proposed project fits the basic guidelines of interest. For example, job training for disadvantaged youth may be an area of interest of a corporate foundation or giving program. Thus, a proposal for a job training program for homeless youth may be considered for funding.

All the corporations reported that they receive requests for more funds than are available and thus the application processes are highly competitive. Therefore, we encourage you to research a corporate foundation or giving program before applying for funding; for example, look at the annual report for a list of recent grantees or, if possible, talk with the foundation or giving program directly to find out about your chances of receiving funds. Then prepare the best proposal you can according to the guidelines given by the corporation. Approaching funding sources that do not specifically give priority to homelessness may be a good idea, but it is not wise to spend a lot of time preparing proposals for funds if your chances are poor because of competition from many other types of programs.

All the corporations listed here provide funding only to nonprofit organizations with 501 (c) (3) tax-exempt status from the Internal Revenue Service. Also, the corporations included have recently awarded grants of at least $5,000 unless it is specifically stated that information on the amount of recent grants is unavailable.

Hasbro Children's Foundation
32 West 23rd Street
New York, NY 10010
(212) 645-2400
Eve Weiss
Executive Director

This foundation provides funding to direct service programs that work to improve the quality of life of children under the age of 12. Programs that address the impact of homelessness on children have recently been funded, and this is an area of particular interest to the foundation. Examples of the types of projects funded include a Children's Aid Society that received funding to support a medical van that goes out to shelters to provide medical and dental care to resident children. A shelter received funding to set up a daycare center within the facility. The foundation has also provided funds to create playgrounds connected with homeless-related programs.

Organizations throughout the country can apply. The amount of funding provided varies, and programs can request all or a portion of the funding needed. Normally, money is not provided for capital or operating costs or individual scholarships. Beyond this, there are no hard and fast rules. The foundation believes that each grant is different and tries to be flexible in giving funds. Funding decisions are made three times a year (February, October, and June) and proposals should be received at least 2 months in advance.

The first step for interested nonprofit organizations is to send a letter that includes a description of the project and the population served (ages of the children), the amount of funding requested, a budget for the proposed project and for organization, a plan for future funding, and proof of tax exempt status.

Citicorp/Citibank
200 S. Wacker Drive
Chicago, IL 60606
(312) 993-3064
Elizabeth Howland
Vice President Corporate Grants

Citicorp/Citibank
1 Court Square
16th Floor
Long Island City, NY 11120
(718) 248-3896

Citicorp's contributions program provides funding in six major areas: Education-Research, Community Development and Revitalization, Health, Culture, International, and the United Way. Since Citicorp gives direct contributions to the United Way, member agencies cannot apply for additional direct support.

In the area of Community Development and Revitalization, several homeless-related programs were funded in 1988. According to the 1988 annual report, Citicorp seeks to fund organizations that address problems such as affordable housing and economic development on the local level. Many different types of programs that provide housing, day care, employment training, and other services have received grants. Programs serving the homeless are receiving increasing support. Approximately $2 million dollars was given in the area of Community Development and Revitalization. In 1988, the majority of grants in this area ranged from $500 to about $30,000, although some larger grants were given.

In the area of Health, a few programs serving homeless families or youth have also received funds. Most grants in this area ranged from $500 to $30,000. A few larger grants were given. The total funding given for 1988 in this area was just over $1 million. For example, Sojourner House in Rochester, NY, which provides housing and counseling services to low-income women in crisis, received a grant of $32,345 to build a new kitchen for the residents. An organization in Boston called C.O.P.E. (Coping with the Overall Pregnancy/Parenting Experience) received a grant of $4,000 to provide free counseling to homeless families with children living in the shelter system. Familes are required to leave a shelter after a limited time; when they move to another shelter, they are assigned a different social worker. C.O.P.E. counselors provide continuity by remaining with the families as they move from one place to another.

Funding is given for several activities including operating costs, renovations, and special projects. Grants are not given to individuals or political groups, usually not to United Way recipients or for fundraising events or advertising. Most grants are for one year.

Citicorp's contributions program provides funding in communities in which it does business. Citicorp sets broad guidelines for the contributions program; however, committees on the local level chaired by Citicorp's regional business managers set the specific priorities for their area. Currently, about 34 of these committees are located in several different states. Interested nonprofit organizations should contact the local contributions committee in their area. A complete list of these committees is contained in the annual report and can be obtained by writing Donna Stiansen at the Long Island, NY, office. Nonprofit organizations that do not fall within the geographic area of a local contributions committee can write to one of the national contributions coordinators to inquire about funding. (These coordinators are also listed in the annual report.)

Santa Fe Pacific Foundation
224 South Michigan Avenue
Chicago, IL 60604-2401
(312) 786-6204
Ron Holden
Executive Director

The foundation places special emphasis on providing funding for the aged and the homeless. Grants given in 1989 included $5,000 to Covenant House of Texas to provide services to the homeless and $2,000 to the Telegraph Hill Neighborhood Center, San Francisco, CA, for capital support to provide expanded services to the aged. A 1989 grantee, the Chicago

Coalition for the Homeless, received a $3,000 grant for general support of the organization.

The foundation provides funding in four different areas, including health and human services. Current programs of interest in this area include: homeless, elderly, youth training and development, mental and physical health education, job training and employment assistance, and crisis aid for abused women and children.

Funding is provided to organizations in areas of company operation in the midwestern, southwestern, and western parts of the United States.

Grants may be used for general operating expenses, staff salaries, and other activities. The majority of the grants are given for general support of organizations, and the use of the funds is basically unrestricted. Some grants, however, are given for specifically designated activities.

Grants may not be used for conferences, seminars, travel expenses, testimonials, or endowment funds. The foundation also does not support participating United Way agencies, public education institutions, national health organizations, religious organizations for sectarian purposes, individuals, political, fraternal or veteran's organizations, or community or other foundations that provide grants to nonprofit organizations.

Average grants are between $1,000 and $5,000. The foundation donates about $2.5 million a year. The foundation gives 300-400 grants each year, and about half of these go to local United Way chapters. The remaining go to organizations that do not participate in the United Way. The competition for funds is intense, and approximately 1 in every 10 or 15 proposals is funded.

Proposals for less than $20,000 are accepted and reviewed continuously. Requests for larger amounts are reviewed in the fall and must be received before September 1. Requests for larger amounts are only taken from projects in which the foundation has a strong interest.

Interested organizations should send a brief cover letter that describes the organization, summarizes the proposal, and states the amount requested. A narrative that explains the organization's history, purpose, geographic area of concern, and accomplishments and the kind and amount of the grant requested and how it will be used should also be provided. Plans for future funding should also be outlined. All proposals should also include proof of tax exempt status, a current audited financial statement and budget data, a list of other sources of support in the most recent year, and a list of the officers and directors of the organization.

For additional information on how to apply for funds contact the foundation directly.

Apple Computer Inc.
Community Grants Program
Apple Community Affairs
20525 Mariani Avenue, M/S 38J
Cupertino, CA 95014
(408) 974-2974

Apple Computer, through its Community Grants Program, provides in-kind donations of computer hardware, software, training, technical support, and printed materials. Community grants are made to a wide variety of nonprofit social service organizations that are involved in such areas as health care, housing, or the environment; and they serve the needs of the elderly, youth, single parents, and others. Apple's goal is to improve the delivery of services through the use of computers. Apple grantees are using their computers to match volunteers with appropriate assignments, to create lists of available housing, to refer clients to the right kind of community service, and to keep track of budgets, mailings, and donors.

The majority of grant recipients are networks of agencies doing similar work, such as coalitions for the homeless or hunger coalitions. The program specifically defines a network as 3 to 15 agencies doing similar work, located in the same community or across the country. Donations average $7,000 to $18,000. Community grants are awarded twice a year; application deadlines are March 1 and September 1 each year.

Prior to applying for a grant, potential grantees are encouraged to conduct a thorough assessment of their computer-related needs. Guidance on how to do a computer needs assessment as well as other pertinent information can be obtained by writing to the Community Grants Program at the above address for the guidelines.

National Medical Enterprises
2700 Colorado Avenue
Santa Monica, CA 90404
(213) 315-8215
Dyanne Hayes
Director, Corporate Contributions

National Medical Enterprises is an international health care provider whose operations include hospitals, home health agencies, pharmacies, and retail outlets. Its corporate giving program provides funding to social service organizations, including those serving homeless families and youth. However, according to the director of corporate contributions, "Funds for this category are limited." Funds may be used for activities including general support, operating costs, or special projects.

Funds are only given to organizations that are located in communities where National Medical Enterprises has an appreciable number of employees living and working. A list of these communities is not available. Interested organizations can simply send a one-page letter of inquiry to find out if they are eligible to apply for funds. Calling the program directly is discouraged. Unfortunately, more detailed information on this program is unavailable.

Ronald MacDonald Children's Charities
One MacDonald's Plaza
Oak Brook, IL 60521
(312) 575-7048
Gerald Newman, President

The main objective of Ronald MacDonald Childrens Charities (RMCC) is to help children achieve their fullest potential. Grants are awarded to develop or support organizations that work in three areas: health care and medical research, education and the arts, and civic and social service. The major focus is the establishment of Ronald MacDonald Houses, which provide homes near hospitals for families of seriously ill children. In addition to this, however, RMCC has given funds for programs serving homeless children. Specifically, the Youth Shelter and Services in Ames, Iowa received a grant to purchase a van to do outreach; the DePelchin Children's Center in Houston, Texas received funds for its teen pregnancy program; and the Maryville Center of Youth in Illinois received a grant to provide housing for sexually abused teens.

All proposed programs must directly benefit children. RMCC prefers to provide funds for "bricks and mortar" activities to expand facilities (e.g., set up children's playrooms) or provide the necessary equipment (van) needed to provide services.

Funds are generally not provided for capital funding or building campaigns, endowment campaigns, seed money for new programs, general administrative costs, advertising or fundraising drives, travel or salaries for staff or individuals, partisan, political or denominational programs, or intermediary funding agencies.

The RMCC Board meets three to four times a year (times of these meetings are unspecified) to consider proposals, and only proposals that arrive at least 3 weeks before the meeting will be reviewed. After submitting an initial proposal, RMCC will contact an organization about when their proposal will be reviewed.

RMCC Board has awarded approximately 46 grants at each of the meetings. At a recent meeting, approximately 150 proposals were being considered. These proposals were for many different projects that fell into the three areas of interest listed above.

Proposals should be submitted to the address and contact person listed above on a RMCC grant application. Proposals must be submitted on the grant application provided by RMCC and available by contacting them at the phone number and address listed above.

Religious Institutions

Lutheran

Director of Community Development
Division for Social Ministry Organizations
of the Evangelical Lutheran Church in America
8765 West Higgins Road
Chicago, IL 60631
(312) 380-2683

Lutheran Church's Missouri Synod World Relief
1333 South Kirkwood Road
St. Louis, MO 63122-7295
(314) 965-9000

Episcopal

Coalition for Human Needs
Episcopal Church
Episcopal Church Center
815 Second Avenue, 6th Floor
New York, NY 10017
(212) 867-8400

Applications for the Coalition for Human Needs must be obtained directly from the office listed. The use of copied application forms is not acceptable.

Presbyterian

Phillip Newell
Community Development Approach to
Homelessness and Housing
100 Witherspoon Street
Louisville, KY 40202
(502) 569-5000

The Presbyterian Hunger Program
100 Witherspoon Street
Louisville, KY 40202
(502) 569-5827

Jewish Fund for Justice
1334 G Street NW
6th Floor
Washington, DC 20005
(202) 638-0050

Religious Affiliated Volunteer Organizations

Jesuit Volunteer Corps: Northwest
P.O. Box 3928
Portland, OR 97208
(503) 228-2457

Jesuit Volunteer Corp: East
18th and Thompson Streets
Philadelphia, PA 19121
(215) 232-0300

Jesuit Volunteer Corp: Midwest
P.O. Box 32692
Detroit, MI 48232
(313) 894-1140

Jesuit Volunteer Corp: Southwest
P.O. Box 23404
1675 7th Street
Oakland, CA 94623
(415) 465-5016

Jesuit Volunteer Corp: South
P.O. Box 3126
Houston, TX 77007
(713) 223-5387

The Jesuit Volunteer Corps is supported by the Catholic religious order of priests Society of Jesus (the Jesuits) and other private sources. It is a 1-year program. More than 350 Jesuit Volunteers (JVs) are working in different types of nonprofit organizations throughout the United States. Many of these volunteers are working at organizations that serve homeless families or youth. For example, a JV in Washington, DC, is working as a "child advocate" for children living in transitional housing. The volunteer works with the children to ensure that they attend school and receive tutoring if necessary and provides activities, support, and friendship.

The five separate Jesuit Volunteer Corps organizations operate independently. Interested organizations should contact the nearest office for information on how to apply for a volunteer. Organizations do not have to have a connection to a church or religious organization to apply. The JVC emphasizes that volunteers are generally placed with organizations that have many needs and few resources, where the volunteer will be well trained and supervised.

Lutheran Volunteer Corps. (LVC)
1226 Vermont Avenue, N.W.
Washington, DC 20005
(202) 387-3222

The Lutheran Volunteer Corps is a ministry of Luther Place Church, Washington, DC, and receives financial support from that congregation as well as many other churches, individuals, grants, and the Evangelical Lutheran Church in America. It is a 1- or 2-year service program providing full-time employees to agencies working on peace and justice issues. Lutheran Volunteers (approximately 60) currently serve in five cities: Baltimore, Washington, DC, Milwaukee, Wilmington, and Chicago. Only nonprofit organizations in these cities can apply for volunteers. LVC places volunteers at nonreligious organizations as well as religious organizations. Several Lutheran volunteers are working at organizations that serve homeless families. LVC seeks to place volunteers in organizations that can clearly demonstrate a need for additional staff and an inability to pay a full salary. Interested organizations in eligible cities should contact the LVC office for further information.

Brethren Volunteer Service
1451 Dundee Avenue
Elgin, IL 60120
(312) 742-5100

The Brethren Volunteer Service is run by the Church of the Brethren. Many of the volunteers are placed at nonprofit organizations related to the church. Nonprofit organizations with a volunteer must be open to dialog on the Christian faith.

Between 90 and 120 Brethren volunteers are serving in the United States in 20 different programs. Volunteers work in advocating for justice, peacemaking, or serving human needs. Some volunteers work at shelters and soup kitchens for the homeless. Generally, volunteers are placed at nonprofit organizations that cannot afford to pay full salary for an additional staff person. Interested nonprofit organizations should contact the BVS directly for more information. Positions are for 1 year.

Mission Volunteers
Presbyterian Church, USA
100 Witherspoon Street
Louisville, KY 40202-1396
(502) 569-5270

Mission Volunteers is an organization run by the Presbyterian Church (USA). Currently, 75-100 mission volunteers are working throughout the United States, including Alaska. Many of these volunteers are helping projects that serve the homeless and refugees.

Nonprofit organizations interested in applying for a volunteer must have the endorsement of the Presbytery and Synod (local and regional governing bodies of the Presbyterian Church (USA)). These volunteers are in great demand.

Several Mennonite groups also run volunteer corps. These volunteers usually work directly through the Mennonite Church.